| Fill in this information to identify your case: | | |
|---|---|--------------------------------------|
| United States Bankruptcy Court for the : | | |
| NORTHERN District of ILLINOIS (State) | | |
| Case Number (If known): | Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13 | ☐ Check if this is an amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together-called a joint case-and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pa | rt 1: | Identify Yourself | | |
|----|---------------------|---|----------------------------|---|
| | | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | Your f | full name | | |
| | Write tl | he name that is on your | Yolanda | |
| | govern identific | ment-issued picture cation (for example, river's license or | First name | First name |
| | passpo | | Middle name | Middle name |
| | | | Ellington-Reese | |
| | identific | our picture cation to your meeting e trustee. | Last name | Last name |
| | | | Suffix (Sr., Jr., II, III) | Suffix (Sr., Jr., II, III) |
| 2. | All oth | ner names you | | |
| | have u | used in the last 8 | First name | First name |
| | | e your married or n names. | Middle name | Middle name |
| | | | Last name | Last name |
| | | | First name | First name |
| | | | Middle name | Middle name |
| | | | Last name | Last name |
| 3. | Only t | he last 4 digits of | | |
| | your S | Social Security | XXX - XX - <u>3829</u> | XXX - XX |
| | Individ | lual Taxpayer ication number | OR | OR |
| | | | 9xx - xx | 9xx - xx |
| | | | | |

Case Number (if known)

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| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
|----|--|---|---|
| 4. | Any business names and Employer Identification Numbers | I have not used any business names or EINs. | I have not used any business names or EINs. |
| | (EIN) you have used in the last 8 years | Business name | Business name |
| | Include trade names and doing business as names | Business name | Business name |
| | | EIN | EIN |
| | | EIN | EIN |
| 5. | Where you live | | If Debtor 2 lives at a different address: |
| | | 17930 Vista Drive Number Street | Number Street |
| | | | |
| | | Country Club Hills IL 60478 City State ZIP Code | City State ZIP Code |
| | | COOK County | County |
| | | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from the one above, fill it in here. Note that the court will send any notices this mailing address. |
| | | Number Street | Number Street |
| | | P.O. Box | P.O. Box |
| | | City State ZIP Code | City State ZIP Code |
| 6. | Why you are choosing | Check one: | Check one: |
| | this district to file for bankruptcy. | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. |
| | | have another reason. Explain. (See 28 U.S.C. § 1408 | I have another reason. Explain. (See 28 U.S.C. § 1408 |
| | | | |
| | | | |
| | | | |
| | | | |

Yolanda

Debtor 1

Yolanda Debtor 1

Ellington-Reese

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Case Number (if known)

Part 2: **Tell the Court About Your Bankruptcy Case** Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals The chapter of the Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box. Bankruptcy Code you are choosing to file Chapter 7 under ☐ Chapter 11 ☐ Chapter 12 ☐ Chapter 13 How you will pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. Have you filed for ☐ No bankruptcy within the last 8 years? Yes. District None ___ When ___ ___ Case Number ___ MM / DD / YYYY MM / DD / YYYY No 10. Are any bankruptcy cases pending or being filed by a spouse who is Yes. not filing this case with _____ When _____ Case Number, if known _____ you, or by a business MM / DD / YYYY parter, or by affiliate? Relationship to you _ When Case Number, if known ____ District MM / DD / YYYY 11. Do you rent your ☐ No. Go to line 12 residence? Has your landlord obtained an eviction judgment against you and do you want to stay in your residence? No. Go to line 12. Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it with this bankruptcy petition.

Debtor 1 Yolanda Document Page 4 of 59
Ellington-Reese Case Number (if known)

| Name of business, if any Name of business, | Are you a sole proprietor of any full- or part-time business? A sole proprietorship is a | ■ No. □ Yes. | Go to Part 4. Name and location of business | | | | | |
|---|---|-----------------|--|----------------------------|----------------------|---------------|------|--|
| Number Street Number Number Street Number N | business you operate as an individual, and is not a separate legal entity such as | | Name of business, if any | | | | | |
| Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(69)) None of the above None of the above None of the above | LLC. If you have more than one sole proprietorship, use a separate sheed and attach it | | Number Street | | | | | |
| Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(61B)) Stockbroker (as defined in 11 U.S.C. § 101(63A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) Nane of the above If you are filling under Chapter 11, the court must know whether you are a small business debtor, you must attach your most rebalances beset, statement of operations, cash-flow statement, and federal income tax return or if any of the documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B). No. I am not filling under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code. Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. Yes. What is the hazard? If immediate attention Yes. What is the hazard? If immediate attention Yes. What is the hazard? If immediate attention Yes. What is the property Number Street Number | | | City | | | State Zip Cod | le | |
| Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(63A)) Commodity Broker (as defined in 11 U.S.C. § 101(69)) None of the above If you are filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor. Yes addition of small business debtor. See 11 U.S.C. § 101(51D). No. I am filing under Chapter 11. In the court must know whether you are a small business debtor, you must attach your most rebalances sheet, statement of operations, cash-flow statement, and federal income tax return or if any of the documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B). No. I am filing under Chapter 11. In the sharkruptcy Code. Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. Yes. | | | Check the appropriate | box to describe your bu | siness: | | | |
| Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above | | | ☐ Health Care Bus | iness (as defined in 11 U | .S.C. § 101(27A)) | | | |
| Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above None of the above None of the above | | | ☐ Single Asset Re | al Estate (as defined in 1 | 1 U.S.C. § 101(51B)) | | | |
| Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor you must attach your most re balance shedy a small business debtor? For a definition of small business debtor, see 11 U.S.C. § 101(51D). No. I am not filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code. The Bankruptcy Code. Seport If You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention No. What is the hazard? If you are filing under Chapter 11, the court must know whether you are a small business debtor you must attach your most re balance sheet, statement, and feeral income tax return or if any of the documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B). No. I am not filing under Chapter 11. No. I am filing under Chapter 11. No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code. The Bankruptcy Code. Yes. What is the hazard? What is the hazard? If you are filing under Chapter 11, the court must know whether you are a small business debtor so that a spray of the definition of the definition of the definition in the Bankruptcy Code. No. I am not filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code. Yes. What is the hazard? If you are filing under Chapter 11, the court must know whether you are a small business debtor according to that a small business debtor according to the definition in the Bankruptcy Code. No. I am not filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code. Yes. What is the hazard? Where is the property? Number Street | | | ☐ Stockbroker (as | defined in 11 U.S.C. § 10 | 01(53A)) | | | |
| Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor, so mall business debtor, see 11 U.S.C. § 101(51D). If you are filing under Chapter 11, the court must know whether you are a small business debtor, you must attach your most re balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of the documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B). No. 1 am not filing under Chapter 11. No. 1 am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code. Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention No. Yes. What is the hazard? If immediate attention is needed, why is it needed? Where is the property? | | | ☐ Commodity Brok | er (as defined in 11 U.S. | C. § 101(6)) | | | |
| Chapter 11 of the Bankruptcy Code and are you a small business debtor? For a definition of small business debtor, see 11 U.S.C. § 101(51D). No. I am not filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code. Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. No. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. No. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. Yes. What is the hazard? If immediate attention is needed, why is it needed? Where is the property? Number Street | | | ☐ None of the abo | ve | | | | |
| In Do you own or have any property that poses or is alleged to pose a threat of imminent and indentifiable hazard to public health or safety? Or do you own any property that needs immediate attention? For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? Where is the property? Number Street | business debtor, see | ☐ No. | am filing under Chapte the Bankruptcy Code. I am filing under Chapte | r 11, but I am NOT a sma | | - | | |
| property that poses or is alleged to pose a threat of imminent and indentifiable hazard to public health or safety? Or do you own any property that needs immediate attention? For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? Where is the property? Number Street | Part 4: Report if You Own or Ha | ve Any Hazard | lous Property or Any Pro | perty That Needs Immedia | ate Attention | | | |
| property that poses or is alleged to pose a threat of imminent and indentifiable hazard to public health or safety? Or do you own any property that needs immediate attention? For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? Where is the property? Number Street | | . | | | | | | |
| public health or safety? Or do you own any property that needs immediate attention? For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? Where is the property? Number Street | property that poses or is alleged to pose a threat | _ | What is the hazard? | | | | | |
| If immediate attention? For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? Where is the property? Number Street | public health or safety? Or do you own any | | | | | | | |
| Where is the property? Number Street | immediate attention? For example, do you own perishable goods, or livestock that must be fed, or a building | | If immediate attention is | s needed, why is it neede | d? | | | |
| Number Street | tnat needs urgent repairs? | | | | | | | |
| Other 700 C | | | Where is the property? | | | | | |
| Ott. 7ID C | | | | | | | | |
| CITY State ZIP C | | | | City | , | State ZIP | Code | |

Entered 05/31/17 13:53:11 Case 17-16732 Doc 1 Filed 05/31/17 Desc Main Document Ellington-Reese Page 5 of 59

Debtor 1

Yolanda

Case Number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

> The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

| About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
|---|---|
| You must check one: | You must check one: |
| I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion. | ☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion. |
| Attach a copy of the certificate and the payment plan, if any, that you developed with the agency. | Attach a copy of the certificate and the payment plan, if any, that you developed with the agency. |
| I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion. | ☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion. |
| Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any. | Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any. |
| I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement. | □ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement. |
| To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case. | To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case. |
| Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed. Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. | Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed. Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. |
| I am not required to receive a briefing about credit counseling because of: | ☐ I am not required to receive a briefing about credit counseling because of: |
| Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances. | Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances. |
| Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so. | Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so. |
| Active duty. I am currently on active military duty in a military combat zone. | Active duty. I am currently on active military duty in a military combat zone. |
| If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. | If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. |

Debtor 1

Yolanda

Document I

Page 6 of 59

Case Number (if known)

| 16. | What kind of debts do you have? | as "incurred by an individual No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily money for a business or inventional money for a business of the business of | consumer debts? Consumer debts are deprimarily for a personal, family, or household business debts? Business debts are debts strength or through the operation of the business debts are debts. | purpose." s that you incurred to obtain ss or investment. |
|-----|---|--|---|--|
| 17. | Are you filing under Chapter 7? | ■ No. I am not filing under Ch | | |
| | Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? | | er 7. Do you estimate that after any exempt p s are paid that funds will be available to distril | · · · · · |
| | How many creditors do you estimate that you owe? | ■ 1-49 □ 50-99 □ 100-199 □ 200-999 | ☐ 1,000-5,000 ☐ 5,001-10,000 ☐ 10,001-25,000 | ☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than 100,000 |
| 9. | How much do you estimate your assets to be worth? | ■ \$0-\$50,000 □ \$50,001-\$100,000 □ \$100,001-\$500,000 □ \$500,001-\$1 million | \$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion |
| | How much do you estimate your liabilities to be? | ■ \$0-\$50,000 □ \$50,001-\$100,000 □ \$100,001-\$500,000 □ \$500,001-\$1 million | \$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion |
| Par | Sign Below | | | |
| For | /ou | correct. If I have chosen to file under Chap | I declare under penalty of perjury that the info ter 7, I am aware that I may proceed, if eligibl nderstand the relief available under each chap | e, under Chapter 7, 11,12, or 13 |
| | | | did not pay or agree to pay someone who is rd read the notice required by 11 U.S.C. § 342 | · |
| | | I understand making a false staten | the chapter of title 11, United States Code, sp nent, concealing property, or obtaining money in fines up to \$250,000, or imprisonment for u d 3571. | or property by fraud in connection |
| | | /s/ Yolanda Ellington Signature of Debtor 1 | | ture of Debtor 2 |
| | | Executed on05/24/2017 | | uted on |

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For your attorney, if you are represented by one

if you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| ✗ /s/ Cecil Denard Scruggs | Date | Date: | 05/30/201 | 7 |
|--|-------------|---------|-----------|---------|
| Signature of Attorney for Debtor | 24.0 | MM / DE | O / YYYY | |
| Cecil Denard Scruggs | | | | |
| Printed name | | | | |
| Geraci Law L.L.C. | | | | |
| Firm name | | | | |
| EE E Marras Ct #2400 | | | | |
| 55 E. Monroe St., #3400 Number Street | | | | |
| | IL | 6060 | 3 | |
| Number Street | IL State | | 3 Code | |
| Number Street Chicago | State | ZIP | | law.com |
| Number Street Chicago City | State | ZIP | Code | law.con |

| Fill in this information to identify your case: | | | | | | |
|---|---------------------|--------------------------------------|---------------------|--|--|--|
| Debtor 1 | Yolanda | Ellington-Reese | | | | |
| | First Name | Middle Name | Last Name | | | |
| Debtor 2 | | | ······ | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | | |
| United States | Bankruptcy Court fo | or the : <u>NORTHERN</u> District of | ILLINOIS (State) | | | |
| Case Number (If known) | r | | | | | |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

| Part 1: | Summarize Your Assets | |
|----------|---|---|
| | | Your assets Value of what you own |
| | e A/B: Property (Official Form 106A/B) v line 55, Total real estate, from Schedule A/B | \$0 |
| 1ь. Сору | line 62, Total personal property, from Schedule A/B | \$ 4,634 |
| 1с. Сору | line 63, Total of all property on <i>Schedule A/B</i> | \$ 4,634 |
| Part 2: | Summarize Your Liabilities | |
| | | Your liabilities Amount you owe |
| | e D: Creditors Who Have Claims Secured by Property (Official Form 106D) the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$0 |
| | e E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$4,050 |
| 3ь. Сору | the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$24,931 |
| | | |
| | | |
| Part 3: | Summarize Your Liabilities | |
| | e I: Your Income (Official Form 106I) our combined monthly income from line 12 of Schedule I | \$2,324.18 |
| | e J: Your Expenses (Official Form 106J) our monthly expenses from line 22c of Schedule J | \$2,358.00 |

Document Ellington-Reese Page 9 of 59

Case Number (if known)

\$ 4,050.00

First Name Middle Name **Answer These Questions for Administrative and Statistical Records** Part 4: 6. Are you filing for bankruptcy under Chapter 7, 11 or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. Yes 7. What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official \$ 3,357.49 Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. 9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: Total claim From Part 4 of Schedule E/F, copy the following: \$ 0.00 9a. Domestic support obligations (Copy line 6a.) \$ 4,050.00 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) $_{0.00}$ 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) 9d. Student loans. (Copy line 6f.) \$ 0.00 9e. Obligations arising out of a separation agreement or divorce that you did not report as \$ 0.00 priority claims. (Copy line 6g.) \$ 0.00 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

9g. Total. Add lines 9a through 9f.

Debtor 1

Yolanda

| | Caso 1 ⁻ | 7 16722 Doc 1 | Filad 05/21/17 Enta | | :53:11 Des | c Main | |
|---|---|---|--|--|-------------------------|--|---------|
| Fill in this in | formation to ide | ntify your case and this fili | ng: | 0 of 59 | | | |
| Debtor 1 | Yolanda | | Ellington-Reese | | | | |
| | First Name | Middle Name | Last Name | | | | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name | | | | |
| | | | | | | | |
| United States | Bankruptcy Court to | or the : <u>NORTHERN</u> Distric | ct of <u>ILLINOIS</u> (State) | | Г | Check if this is an | |
| Case Number (If known) | | | | | L | amended filing | |
| Official Fo | orm 106A | /B | | _ | | amonada iiii ig | |
| | e A/B: Pr | | | | | | 12/15 |
| ategory where esponsible for ages, write you Part 11 | you think it fits supplying correur name and cas | best. Be as complete and a ct information. If more spa e number (if known). Answ sidence, Building, Land, or O | n asset only once. If an asset fits in naccurate as possible. If two married possible is needed, attach a separate sheet ver every question. Other Real Esate You Own or Have an Interpretation in the presidence, building, land, or similar any residence, building, land, or similar in the presidence in the presidence is not set to the presidence in the p | eople are filing together, bo to this form. On the top of terest In | oth are equally | | |
| Yes. | Describe | | | | | | |
| | - | - | our entries fro Part 1, including any e | · - | > | | \$0.00 |
| | Describe Your Vel | sialac | | | | | ψ0.00 |
| Part 2: | Pescribe rour ver | licies | | | | | |
| No. Yes. No. Yes. No. Quantification of the second of | Describe flake: flodel: fear: pproximate Milea other information: 2006 Nissan Altim niles. directaft, motor Boats, trailers, motor Describe | homes, ATVs and other recors, personal watercraft, fishing | Who has an interest in the property Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and and Check if this is community pro- instructions) Creational vehicles, other vehicles, ar vessels, snowmobiles, motorcycle accessor | continue to the continue to th | he amount of any secure | laims or exemptions. Put ed claims on Schedule D: ims Secured by Property Current value of t portion you own? 0 \$ 2,4 | he |
| | | - | our entries fro Part 2, including any e | · = | | \$ 2 | ,459.00 |
| | | | | - | | | |
| Part 3: | Describe Your Per | sonal and Household Items | | | | | |
| Do you own or | have any legal | or equitable interest in any | of the following items? | | | Current value of the portion you own? Do not deduct secured claor exemptions | aims |
| | | ishings urniture, linens, china, kitchenw | are | | | | |
| Yes. | Describe | Furniture, linens, small appliar | nces, table & chairs, bedroom set | | \$1,000 | \$1,0 | 000.00 |

Filed 05/31/17 Entered 05/31/17 13:53:11 Desc Main Document Page 11 of 59 umber (if known) Doc 1 Case 17-16732 Yolanda Debtor 1 07. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games No. Yes. Describe..... \$400 Flat screen TV, computer, cell phone 400.00 08. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles No. Describe..... Yes. 0.00 09. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks: carpentry tools: musical instruments No. Describe..... 0.00 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment No. Describe..... Yes. 0.00 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories No. es. Describe..... \$200 Everyday clothes, shoes, accessories 200.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No. Describe..... Everyday jewelry, costume jewelry \$200 200.00 13. Non-farm animals Examples: Dogs, cats, birds, horses No. Describe..... 0.00 14. Any other personal and household items you did not already list, including any health aids you did not list No. Describe..... books, CDs, DVDs & Family Photos \$75 75.00 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$1,875.00 for Part 3. Write that number here **Describe Your Financial Assets** Part 4:

Do you own or have any legal or equitable interest in any of the following?

Current value of the portion you own?

Do not deduct secured claims

or exemptions

0.00

16. Cash

Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

No.

Yes. Describe.....

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— Ellington-Reese Document Page 12 of 59 Jumber (if known)

Last Name Yolanda Case 17-16732 Doc 1 Debtor 1

Middle Name

Desc Main

| 17. | Deposits o | f money | | | | | |
|-----|-------------|----------------------|--|---------|--|----------------|---------|
| | | | | | eposit; shares in credit unions, brokerage houses, | | |
| | | imilar institutions. | If you have multiple accounts with the | same | institution, list each. | | |
| | No. | | | | | | |
| | Yes. | Describe | Account Type: | Ins | titution name: | | |
| | | | Savings Account | | Great Lakes Credit Union | _ \$ | 44.00 |
| | | | Checking Account | | Great Lakes Credit Union | \$ | 50.00 |
| | | | Checking Account | | Healthcare Associates Credit Union | - \$ | 206.00 |
| | | | | | | s | 300.00 |
| 18. | Bonds. mu | tual funds. or p | publicly traded stocks | | | · | |
| | - | | tment accounts with brokerage firms, r | money | market accounts | | |
| | No. | | | | | | |
| | Yes. | Describe | Institution or issuer name: | | | | |
| | | | | | | \$ | 0.00 |
| 19. | Non-public | ly traded stock | and interests in incorporated a | nd un | incorporated businesses, including an interest in | • | |
| | No. | | | | | | |
| | Yes. | Describe | Name of Entity and Percent of O |)wner | ship: | | |
| | | 2000 | | | - 1 | \$ | 0.00 |
| 20. | Governme | nt and corporat | e bonds and other negotiable ar | nd no | n-negotiable instruments | | |
| | | - | le personal checks, cashiers' checks, p | | _ | | |
| | Non-negotia | able instruments a | re those you cannot transfer to someo | ne by | signing or delivering them. | | |
| | No. | | | | | | |
| | Yes. | Describe | Issuer name: | | | | |
| | | | | | | \$ | 0.00 |
| 21. | Retirement | or pension ac | counts | | | | |
| | Examples: | Interests in IRA, E | RISA, Keogh, 401(k), 403(b), thrift sav | /ings a | ccounts, or other pension or profit-sharing plans | | |
| | ∐No. | | | | | | |
| | Yes. | Describe | Type of account and Institution n | name: | | | |
| | | | 401(k) or similar plan | | Employer | \$ | Unknown |
| | | | | | | \$ | 0.00 |
| 22. | Security de | eposits and pre | payments | | | | |
| | | | osits you have made so that you may o | | | | |
| | | Agreements with I | andlords, prepaid rent, public utilities (| electri | c, gas, water), telecommunications | | |
| | No. | | | | | | |
| | Yes. | Describe | Institution name or individual: | | | | |
| | | | | | | \$ | 0.00 |
| 23. | | A contract for a | a periodic payment of money to | you, | either for life or for a number of years) | | |
| | No. | | | | | | |
| | Yes. | Describe | Issuer name and description: | | | | |
| | | | | | | \$ | 0.00 |
| 24. | | | | ABLE | E program, or under a qualified state tuition program. | | |
| | | 9 550(b)(1), 529A | (b), and 529(b)(1). | | | | |
| | No. | | location time are an and also existing | 0 | anataly file the assemble of any interests 44 LLC C 5 FO4/a). | | |
| | Yes. | Describe | institution name and description. | . Sepa | arately file the records of any interests.11 U.S.C. § 521(c): | • | 0.00 |
| 25 | Truoto ocu | iitabla ar futura | interests in property (ather the | n anu | thing listed in line 1), and rights or powers | \$ | 0.00 |
| 25. | | inable of future | miterests in property (other than | ii aiiy | thing listed in line 1), and rights of powers | | |
| | No. | | | | | _ | |
| | Yes. | Describe | | | | | 0.00 |
| 20 | Detente es | | months treads assurate and other | :4-11 | and the land and t | \$ | 0.00 |
| 20. | • | ., . | marks, trade secrets, and other ames, websites, proceeds from royaltie | | | | |
| | No. | memer domain ne | arnes, websites, proceeds from royalite | JS and | neerising agreements | | |
| | = | Describe | | | | _ | |
| | Yes. | Describe | | | | • | 0.00 |
| 27 | Licanese f | ranchiese and | other general intangibles | | | \$ | 0.00 |
| 21. | | | | ation h | oldings, liquor licenses, professional licenses | | |
| | No. | | | | | | |
| | Yes. | Describe | | | | | |
| | L 163. | Describe | | | | \$ | 0.00 |
| | | | | | | Ψ | |

Yolanda Case 17-16732 Doc 1

Filed 05/31/17
Elington-Reese
Document
Last Name

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Desc Main

Debtor 1

Middle Name

| Моі | ney or prop | erty owed to yo | u? | Current value portion you ov Do not deduct se or exemptions | wn? |
|-----|-------------------------|-------------------|---|--|---------------|
| 28. | Tax refund | s owed to you | | | |
| | No. Yes. | Describe | | s | 0.00 |
| 29. | Family sup Examples: | = | um alimony, spousal support, child support, maintenance, divorce settlement, property settlement | *_ | <u> </u> |
| | Yes. | Describe | | | 0.00 |
| 30. | Examples: | | owes you ability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, id loans you made to someone else | • | <u> </u> |
| | Yes. | Describe | | | 0.00 |
| 31. | | | lies r life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance Company Name & Beneficiary: | \$_ | 0.00 |
| | Yes. | Describe | Health & term life insurance | \$0 \$ | 0.00 |
| 32. | If you are th | | at is due you from someone who has died iiving trust, expect proceeds from a life insurance policy, or are currently entitled to receive as died. | <u> </u> | |
| | Yes. | Describe | | \$ | 0.00 |
| 33. | _ | - | s, whether or not you have filed a lawsuit or made a demand for payment ment disputes, insurance claims, or rights to sue | | |
| | Yes. | Describe | | \$_ | 0.00 |
| 34. | Other cont | _ | quidated claims of every nature, including counterclaims of the debtor and rights | | |
| | Yes. | Describe | | \$ | 0.00 |
| 35. | Any financ | ial assets you d | id not already list | | |
| | Yes. | Describe | | | 0.00 |
| 36. | Add the do | llar value of all | of your entries from Part 4, including any entries for pages you have attached | _ | |
| | | | er here> | | \$301.00 |
| P | art 5: | escribe Any Bus | iness-Related Property You Own or Have an Interest In. List any real estate in Part 1. | | |
| 37. | Do you ow No. | n or have any le | gal or equitable interest in any business-related property? | | |
| | Yes. | | | Current value portion you o | |
| | | | | Do not deduct so or exemptions | ecured claims |
| 38. | Accounts r | eceivable or co | mmissions you already earned | | |
| | Yes. | Describe | | \$_ | 0.00 |

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39. Office equipment, furnishings, and supplies Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices Yes. Describe..... 0.00 40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade Yes. Describe..... 0.00 41. Inventory No. Yes. Describe..... 0.00 42. Interests in partnerships or joint ventures Name of Entity and Percent of Ownership: Yes. Describe..... 0.00 43. Customer lists, mailing lists, or other compilations No. Yes. Describe..... 0.00 44. Any business-related property you did not already list Describe..... 0.00 45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached \$ 0.00 for Part 5. Write that number here ----Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Describe..... Yes 0.00 47. Farm animals Examples: Livestock, poultry, farm-raised fish No. Yes. Describe..... 0.00 48. Crops-either growing or harvested No. Yes. Describe..... 0.00 49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade No. Yes. Describe..... 0.00 50. Farm and fishing supplies, chemicals, and feed No. Yes. Describe..... 0.00 51. Any farm- and commercial fishing-related property you did not already list No. Yes. Describe..... 0.00 52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached \$0.00

Yolanda Case 17-16732

Doc 1

Middle Name

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— Ellington-Reese Document Page 15 of 59 umber (if known)

Last Name Desc Main

| Part 7: Describe All Property You Own or Have an Interest in That You Did Not List | Above | |
|--|-------------|-------------|
| 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership No. | | |
| Yes. Describe | | \$0.00 |
| 54. Add the dollar value of all of your entries from Part 7. Write that number here | > | \$0.00 |
| Part 8: List the Totals of Each Part of this Form | | |
| 55. Part 1: Total real estate, line 2 | | \$ 0.00 |
| 56. Part 2: Total vehicles, line 5 | \$ 2,459.00 | |
| 57. Part 3: Total personal and household items, line 15 | \$ 1,875.00 | |
| 58. Part 4: Total financial assets, line 36 | \$ 301.00 | |
| 59. Part 5: Total business-related property, line 45 | \$ 0.00 | |
| 60. Part 6: Total farm- and fishing-related property, line 52 | \$ 0.00 | |
| 61. Part 7: Total other property not listed, line 54 | \$ 0.00 | |
| 62. Total personal property. Add lines 56 through 61 | \$ 4,635.00 | \$ 4,635.00 |
| 63. Total of all property on Schedule A/B. Add line 55 + line 62 | | \$4,635.00 |

Schedule A/B: Property Page 6 of 6 Official Form 106A/B Record # 724783

| Fill in this information to identify your case: | | | | |
|---|----------------------|-------------------------------------|------------------|--|
| Debtor 1 | Yolanda | | Ellington-Reese | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | |
| United States | Bankruptcy Court for | the : <u>NORTHERN</u> District of _ | ILLINOIS (State) | |
| Case Number | r | | _ | |
| (If known) | | | | |

Official Form 106C

Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions-such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds-may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| Part 1: Identify the Property You Claim as Exempt | | | | | |
|--|--|--------------------------------------|---|--------------------------------------|--|
| 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you. | | | | | |
| = | ming state and federal nonbankrupto | | § 522(b)(3) | | |
| You are clair | ming federal exemptions. 11 U.S.C. | § 522(b)(2) | | | |
| | | | | | |
| 2. For any propert | y you list on <i>Schedule A/B</i> that yo | u claim as exempt, fill in t | the information below. | | |
| | on of the property and line on hat lists this property | Current value of the portion you own | Amount of the exemption you claim | Specific laws that allow exemption | |
| | | Copy the value from Schedule A/B | Check only one box for each exemption | | |
| Brief description: | 2006 Nissan Altima with over 148,000 miles. | \$_2,459 | \$ _2,400 | 735 ILCS 5/12-1001(c) - \$2,400.00 | |
| Line from Schedule A/B: | 03 | | 100% of fair market value, up to any applicable statutory limit | | |
| Brief description: | Furniture, linens, small appliances, table & chairs, bedroom set | \$_1,000 | | 735 ILCS 5/12-1001(b) - \$1,000.00 | |
| Line from Schedule A/B: | 06 | | 100% of fair market value, up to any applicable statutory limit | | |
| Brief description: | Flat screen TV, computer, cell phone | \$_400 | | 735 ILCS 5/12-1001(b) - \$400.00 | |
| Line from Schedule A/B: | 07 | | 100% of fair market value, up to any applicable statutory limit | | |
| Brief description: | Everyday clothes, shoes, accessories | \$_200 | \$ | 735 ILCS 5/12-1001(a),(e) - \$200.00 | |
| Line from Schedule A/B: | 11 | | 100% of fair market value, up to any applicable statutory limit | | |
| | | | | | |
| Official Form 106C | Record # 724783 | Schedule C: T | he Property You Claim as Exempt | Page 1 of 2 | |

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Debtor 1 Yolanda

First Name

Middle Name

| Part 2: Addi | tional Page | | | | |
|---|---|--------------------------------------|---|--------------------------------------|--|
| • | ion of the property and line on that lists this property | Current value of the portion you own | Amount of the exemption you claim | Specific laws that allow exemption | |
| | | Copy the value from Schedule A/B | Check only one box for each exemption | | |
| Brief description: | Everyday jewelry, costume jewelry | <u>\$_200</u> | \$ | 735 ILCS 5/12-1001(a),(e) - \$200.00 | |
| Line from Schedule A/B: | 12 | | 100% of fair market value, up to any applicable statutory limit | | |
| Brief description: | books, CDs, DVDs & Family Photos | <u>\$</u> 75 | \$ | 735 ILCS 5/12-1001(a) - \$75.00 | |
| Line from Schedule A/B: | 14 | | 100% of fair market value, up to any applicable statutory limit | | |
| Brief description: | Savings Account, Great Lakes Credit Union | \$ <u>44</u> | \$ | 735 ILCS 5/12-1001(b) - \$44.00 | |
| Line from Schedule A/B: | <u>17</u> | | 100% of fair market value, up to any applicable statutory limit | | |
| Brief description: | Checking Account, Great Lakes Credit Union | \$_50 | \$ | 735 ILCS 5/12-1001(b) - \$50.00 | |
| Line from Schedule A/B: | <u>17</u> | | 100% of fair market value, up to any applicable statutory limit | | |
| Brief description: | Checking Account, Healthcare Associates Credit Union | \$_206 | | 735 ILCS 5/12-1001(b) - \$206.00 | |
| Line from Schedule A/B: | <u>17</u> | | 100% of fair market value, up to any applicable statutory limit | | |
| Brief description: | 401(k) or similar plan, Employer | \$Unknown | \$ | 735 ILCS 5/12-1006 - \$0.00 | |
| Line from Schedule A/B: | 21 | | 100% of fair market value, up to any applicable statutory limit | | |
| 3. Are you claimi | ng a homestead exemption of more | than \$155,675? | | | |
| (Subject to adjustment on 4/01/16 and every 3 years after that for cases filed on or after the date of adjustment .) ■ No. Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? ■ No | | | | | |
| Yes. | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| Official Form 106 | C Record # 724783 | Schedule C: The | Property You Claim as Exempt | Page 2 of 2 | |

| 2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately Amount of claim Value of collateral | Fill in this i | nformation to identif | | Filed 05/21/17 Entere | d 05/31/17 13 of 59 | 0.00.11 | Desc Main | |
|---|--|---|--|--|--|---------------------------------|---|----------------------------|
| Debtor 2 (Spouse, if filing) First Name | Debtor 1 | Yolanda | | Ellington-Reese | | | | |
| United States Bankruptcy Court for the:NORTHERNDistrict ofILLINOIS | | First Name | Middle Name | Last Name | | | | |
| United States Bankruptcy Court for the:NORTHERN District ofILLINOIS | | First Name | Middle Name | LostNome | | | | |
| Case Number | (Spouse, if filing) | First Name | Middle Name | Last Name | | | | |
| Case Number Check if this is amended filing Official Form 106D Schedule D: Creditors Who Have Claims Secured by Property Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known). 1. Do any creditors have claims secured by your property? No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Yes. Fill in all of the information below. 2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim list the other creditors in Part 2. | United State | s Bankruptcy Court for the | he: <u>NORTHERN</u> District of | | | | _ | |
| Official Form 106D Schedule D: Creditors Who Have Claims Secured by Property Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known). 1. Do any creditors have claims secured by your property? No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Yes. Fill in all of the information below. 2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. | Case Number | er | | (Glate) | | | Check if thi | s is an |
| Schedule D: Creditors Who Have Claims Secured by Property Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known). 1. Do any creditors have claims secured by your property? No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Yes. Fill in all of the information below. 2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim list the other creditors in Part 2. | (If known) | | | | | | amended fi | ling |
| 1. Do any creditors have claims secured by your property? No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Yes. Fill in all of the information below. List All Secured Claims Column A Column A Amount of claim Value of collateral The creditor has no exception has a particular claim, list the other creditors in Part 2 | Schodule | <u> </u> | s Who Have Clair | ms Secured by Property | | | | 12/1 |
| Yes. Fill in all of the information below. List All Secured Claims Column A Column A Column A Amount of claim Value of collateral | Be as complet | e D: Creditors e and accurate as po | ossible. If two married peop ed, copy the Additional Pag | ole are filing together, both are equally ge, fill it out, number the entries, and at | | | ny | 12/1 |
| List All Secured Claims Column A Column A Column A Column A Value of collateral for each claim, If more than one creditor has a particular claim, list the other creditors in Part 2 | Be as complet information. If additional pag | e D: Creditors e and accurate as po more space is neede es, write your name | ossible. If two married peop ed, copy the Additional Pag and case number (if known | ole are filing together, both are equally ge, fill it out, number the entries, and at | | | ny | 12/ |
| 2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim list the other creditors in Part 2. Column A Amount of claim Value of collateral | Be as complet information. If additional pag | e D: Creditors e and accurate as po more space is needees, write your name editors have claims | ossible. If two married peop ed, copy the Additional Pag and case number (if known secured by your property? | ole are filing together, both are equally ge, fill it out, number the entries, and at ı). | tach it to this form. C | n the top of ar | ny | 12/ |
| 2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately Amount of claim Value of collateral | Be as completed information. If additional pages 1. Do any creation No. C | e D: Creditors e and accurate as po more space is neede es, write your name editors have claims s heck this box and sul | ossible. If two married peop ed, copy the Additional Pag and case number (if known secured by your property? bmit this form to the court wit | ole are filing together, both are equally ge, fill it out, number the entries, and at ı). | tach it to this form. C | n the top of ar | ny | 12/ |
| for each claim. If more than one creditor has a particular claim, liet the other creditors in Part 2 | Be as complet information. If additional pag 1. Do any cre No. C | e D: Creditors e and accurate as pomore space is needees, write your name editors have claims a heck this box and sul | ossible. If two married peop ed, copy the Additional Pag and case number (if known secured by your property? bmit this form to the court with ation below. | ole are filing together, both are equally ge, fill it out, number the entries, and at ı). | tach it to this form. C | n the top of ar | ny | 12/ |
| Do not deduct the analysis and | Be as complet information. If additional pag 1. Do any cre No. C Yes. F | e D: Creditors e and accurate as po more space is neede es, write your name editors have claims s heck this box and sul ill in all of the informa | possible. If two married peop ed, copy the Additional Pag and case number (if known secured by your property? bmit this form to the court with ation below. | ole are filing together, both are equally ge, fill it out, number the entries, and at at). th your other schedules. You have nothing | tach it to this form. C | n the top of ar | Column A | Column C |
| | Be as complet information. If additional pag 1. Do any cro No. C Yes. F Part 1: 2. List all so for each of | e D: Creditors e and accurate as po more space is neede es, write your name editors have claims s heck this box and sul ill in all of the informa List All Secured Claim ecured claims. If a cre claim. If more than or | possible. If two married peoped, copy the Additional Pag and case number (if known secured by your property? bmit this form to the court with ation below. | ole are filing together, both are equally ge, fill it out, number the entries, and at at a control of the contr | ach it to this form. Congression of the congression | mn A unt of claim of deduct the | Column A Value of collateral that supports this | |
| | Be as complet information. If additional pag 1. Do any cro No. C Yes. F Part 1: 2. List all so for each of | e D: Creditors e and accurate as po more space is neede es, write your name editors have claims s heck this box and sul ill in all of the informa List All Secured Claim ecured claims. If a cre claim. If more than or | possible. If two married peoped, copy the Additional Pag and case number (if known secured by your property? bmit this form to the court with ation below. | ole are filing together, both are equally ge, fill it out, number the entries, and at at a control of the contr | ach it to this form. Congression of the congression | mn A unt of claim of deduct the | Column A Value of collateral that supports this | Column C Unsecured portion |

| Fi | II in this in | Caco 17 16722 Doc | 1 Filad 05/21/17 Entor | ed 05/31/17 13:53:11 9 of 59 | Desc Main | |
|--------------------------------|--|---|---|---|------------------------------|--------------------|
| D | ebtor 1 | Yolanda | Ellington-Reese | 0100 | | |
| | CDIOI I | First Name Middle Name | Last Name | | | |
| D | ebtor 2 | - | | | | |
| (S | pouse, if filing) | First Name Middle Name | Last Name | | | |
| U | nited States | Bankruptcy Court for the : <u>NORTHERN</u> D | District of <u>ILLINOIS</u> | | | |
| C | ase Number | | (State) | | Check if | this is an |
| | f known) | | | | amende | d filing |
| Off | icial F | orm 106E/F | | | | |
| | | E/F: Creditors Who Have | a Unacquired Claims | | | 12/15 |
| A/B: i redi leed op o | Property (fors with ped, copy the fany addited | Official Form 106A/B) and on <i>Schedule</i> partially secured claims that are listed in | , , | ases (Official Form 106G). Do not inc Secured by Property. If more space i | clude any is | |
| | | ditors have priority unsecured claims a | gainst you? | | | |
| т. Б | _ ` | | ganist your | | | |
| L | Yes. | to Part 2. | | | | |
| r | each claim nonpriority unsecured | listed, identify what type of claim it is. If a amounts. As much as possible, list the cl claims, fill out the Continuation Page of F | itor has more than one priority unsecured clain claim has both priority and nonpriority amou aims in alphabetical order according to the creat 1. If more than one creditor holds a partic structions for this form in the instruction book | nts, list that claim here and show both reditor's name. If you have more than t cular claim, list the other creditors in Pa | priority and two priority | |
| | | | | Total claim | Priority amount | Nonpriority amount |
| 2.1 | Illinois [| Department of Revenue | Last 4 digits of account number | <u>\$ 1,600.00</u> | \$ <u>1,600.00</u> | \$ <u>0.00</u> |
| | Creditor's | | When was the debt incurred? 2016 | | | |
| | PO Box Number | Street | When was the debt incurred? | | | |
| | | | As of the date you file, the claim is: Check a | II that apply | | |
| | | | Contingent | или орргу | | |
| | Springfi | | Unliquidated | | | |
| | City Who owes | State Zip Code the debt? Check one. | Disputed | | | |
| | Debtor | 1 only | | | | |
| | Debtor : | 2 only | Type of PRIORITY unsecured claim: | | | |
| | = | 1 and Debtor 2 only | Domestic support obligations | | | |
| | = | one of the debtors and another | Taxes and certain other debts you owe the go | overnment | | |
| | _ | if this claim relates to a unity debt | Claims for death or personal injury while you | Wara | | |
| | | m subject to offest? | intoxicated | AAG1G | | |
| | No | - | Other. Specify | | | |
| | Yes | | | | | |

Doc 1 Filed 05/31/17 Entered 05/31/17 13:53:11 Desc Main Case 17-16732 Page 20 of 59 **Pocument** Yolanda Debtor 1 Your PRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth. Total claim **Priority** Nonpriority amount amount \$_0.00 Illinois Department of Revenue \$ 2,450.00 \$ 2,450.00 2.2 Last 4 digits of account number _ Creditor's Name 2014-2015 When was the debt incurred? PO Box 19044 Number As of the date you file, the claim is: Check all that apply. Contingent Springfield 62794-9044 Unliquidated State Zip Code Disputed Who owes the debt? Check one Debtor 1 only Debtor 2 only Type of PRIORITY unsecured claim: Domestic support obligations Debtor 1 and Debtor 2 only Taxes and certain other debts you owe the government At least one of the debtors and another Check if this claim relates to a community debt Claims for death or personal injury while you were Is the claim subject to offest? intoxicated No Other. Specify Yes List All of Your NONPRIORITY Unsecured Claims 3. Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. Yes. 4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2. **Total claim** American Web Loan \$ 750.00 4.1 Last 4 digits of account number _ Creditor's Name 2016 2128 N. 14th St When was the debt incurred? Number Suite 1 #130 As of the date you file, the claim is: Check all that apply. Contingent OK 74601 Ponca City Unliquidated State Zip Code Disputed Who owes the debt? Check one. Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Student loans Debtor 1 and Debtor 2 only

Obligations arising out of a separation agreement or divorce

Debts to pension or profit-sharing plans, and other similar debts

that you did not report as priority claims

Other. Specify PayDay Loan

At least one of the debtors and another

Check if this claim relates to a community debt

Is the claim subject to offest?

No

| Debtor 1 | Yolanda | -10732 | D00 1 | Pagument | Page 21 of 59 | Desc Main |
|----------|------------|-------------|-------|-----------|---------------|-----------|
| | First Name | Middle Name | • | Last Name | | |

| Part 2: Your NONPRIORITY Unsecured Claims - | Continuation Page | | |
|---|--|----------------------------------|--------------------|
| After listing any entries on this page, number them | beginning with 4.4, followed by 4.5, a | nd so forth. | Total Claim |
| 4.2 Avant INC | Last 4 digits of account number _ | 3376 | \$ <u>2,501.00</u> |
| Creditor's Name | | 2014-2015 | |
| 640 N Lasalle St | When was the debt incurred? | 2014-2013 | |
| Number Street | | | |
| | As of the date you file, the claim is | : Check all that apply. | |
| Chicago IL 60654 | Contingent | | |
| City State Zip Code | Unliquidated | | |
| Who owes the debt? Check one. | Disputed | | |
| Debtor 1 only | | | |
| Debtor 2 only | Type of NONPRIORITY unsecured | claim: | |
| Debtor 1 and Debtor 2 only | Student loans | | |
| At least one of the debtors and another | Obligations arising out of a separat | tion agreement or divorce | |
| Check if this claim relates to a | that you did not report as priority cl | aims | |
| community debt | Debts to pension or profit-sharing p | plans, and other similar debts | |
| Is the claim subject to offest? | _ | | |
| No □ | Other. Specify Personal Loan | | |
| Yes A 2 Barclays BANK Delaware | Last 4 digits of account number | NULL | \$ 1,632.00 |
| Creditor's Name | Last 4 digits of account number _ | | <u> </u> |
| Po Box 8803 | When was the debt incurred? | 2013-2016 | |
| Number Street | | | |
| | As of the date you file, the claim is | . Check all that apply | |
| | Contingent | . Oncok all that apply. | |
| Wilmington DE 19899 | Unliquidated | | |
| City State Zip Code | Disputed | | |
| Who owes the debt? Check one. | | | |
| Debtor 1 only | - ()(0)(0)(0)(0)(0) | | |
| Debtor 2 only | Type of NONPRIORITY unsecured Student loans | claim: | |
| Debtor 1 and Debtor 2 only | Obligations arising out of a separat | tion agreement or divorce | |
| At least one of the debtors and another | that you did not report as priority cl | | |
| Check if this claim relates to a community debt | Debts to pension or profit-sharing p | | |
| Is the claim subject to offest? | Design to perioder or profit origining p | Statio, and other diffinal debto | |
| No | Other. Specify Credit Card or | Credit Use | |
| Yes | | | |
| 4.4 Blue Trust Loans | Last 4 digits of account number _ | | \$ <u>1,000.00</u> |
| Creditor's Name LCO P.O. Box 1754 | When was the debt incurred? | 2016 | |
| | When was the debt incurred? | | |
| Number Street | | | |
| | As of the date you file, the claim is | : Check all that apply. | |
| Hayward WI 54843 | Contingent | | |
| City State Zip Code | Unliquidated | | |
| Who owes the debt? Check one. | Disputed | | |
| Debtor 1 only | | | |
| Debtor 2 only | Type of NONPRIORITY unsecured | claim: | |
| Debtor 1 and Debtor 2 only | Student loans | | |
| At least one of the debtors and another | Obligations arising out of a separat | tion agreement or divorce | |
| Check if this claim relates to a | that you did not report as priority cl | | |
| community debt | Debts to pension or profit-sharing p | plans, and other similar debts | |
| Is the claim subject to offest? | BoyDoy Laca | | |
| Yes | Other. Specify PayDay Loan | | |

| ebtor 1 | Yolanda | 0132 | DOCI | | Page 22 of 59 | Desc Mail |
|---------|------------|-------------|------|-----------|---------------|-----------|
| | First Name | Middle Name | | Last Name | | |

| Pa | Your NONPRIORITY Unsecured Claims - | Continuation Page | | |
|-------|---|---|--------------------------------|--------------------|
| After | listing any entries on this page, number them | beginning with 4.4, followed by 4.5, ar | nd so forth. | Total Claim |
| 4.5 | Capital ONE BANK USA N | Last 4 digits of account number _ | NULL | \$ 2,534.00 |
| | Creditor's Name | | 2015-2016 | |
| | 15000 Capital One Dr | When was the debt incurred? | 2013-2010 | |
| | Number Street | | | |
| | | As of the date you file, the claim is: | : Check all that apply. | |
| | Disharand VA 00000 | Contingent | | |
| | Richmond VA 23238 | Unliquidated | | |
| | City State Zip Code Who owes the debt? Check one. | Disputed | | |
| | Debtor 1 only | | | |
| | Debtor 2 only | Type of NONPRIORITY unsecured | claim: | |
| | Debtor 1 and Debtor 2 only | Student loans | | |
| | At least one of the debtors and another | Obligations arising out of a separat | ion agreement or divorce | |
| | Check if this claim relates to a | that you did not report as priority cla | aims | |
| | community debt | Debts to pension or profit-sharing p | plans, and other similar debts | |
| | Is the claim subject to offest? | <u></u> | | |
| | No ∏Yes | Other. Specify Credit Card or | Credit Use | |
| 4.6 | Cash Advance | Last 4 digits of account number | | \$ 955.00 |
| | Creditor's Name | _ | | |
| | 2533 N. Carson Street | When was the debt incurred? | 2016 | |
| | Number Street | | | |
| | Suite 4976 | As of the date you file, the claim is: | : Check all that apply. | |
| | | Contingent | | |
| | Carson City NV 89706 | Unliquidated | | |
| | City State Zip Code Who owes the debt? Check one. | Disputed | | |
| | Debtor 1 only | - | | |
| | Debtor 2 only | Type of NONPRIORITY unsecured | olaim: | |
| | Debtor 1 and Debtor 2 only | Student loans | Ciaiii. | |
| | At least one of the debtors and another | Obligations arising out of a separat | ion agreement or divorce | |
| | | that you did not report as priority cla | | |
| | Check if this claim relates to a community debt | Debts to pension or profit-sharing p | | |
| | Is the claim subject to offest? | | | |
| | No | Other. Specify PayDay Loan | | |
| | Yes | | | |
| 4.7 | Cashcall INC | Last 4 digits of account number | 9408 | \$ <u>1,023.00</u> |
| | Creditor's Name | When was the daht incomed? | 2012-2012 | |
| | 1 City Blvd W | When was the debt incurred? | | |
| | Number Street | | | |
| | | As of the date you file, the claim is | : Check all that apply. | |
| | Orange CA 92868 | Contingent | | |
| | City State Zip Code | Unliquidated | | |
| | Who owes the debt? Check one. | Disputed | | |
| | Debtor 1 only | | | |
| | Debtor 2 only | Type of NONPRIORITY unsecured | claim: | |
| | Debtor 1 and Debtor 2 only | Student loans | | |
| | At least one of the debtors and another | Obligations arising out of a separat | ion agreement or divorce | |
| | Check if this claim relates to a | that you did not report as priority cla | aims | |
| | community debt | Debts to pension or profit-sharing p | plans, and other similar debts | |
| | Is the claim subject to offest? | | | |
| | ■ No | Other. Specify Personal Loan | | |
| 1 | Yes | | | |

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Case Number (if known) <u>Pagument</u> Yolanda Debtor 1

| Pa | Your NONPRIORITY Unsecured Claims - | Continuation Page | | |
|-------|---|---|---------------------------------|------------------|
| After | listing any entries on this page, number them | beginning with 4.4, followed by 4.5, ar | nd so forth. | Total Claim |
| 4.8 | CBNA | Last 4 digits of account number _ | NULL | <u>\$_520.00</u> |
| | Creditor's Name | | 2015 2016 | |
| | Po Box 6497 | When was the debt incurred? | 2015-2016 | |
| | Number Street | | | |
| | | As of the date you file, the claim is | : Check all that apply. | |
| | | Contingent | | |
| | Sioux Falls SD 57117 | Unliquidated | | |
| | City State Zip Code Who owes the debt? Check one. | Disputed | | |
| | Debtor 1 only | | | |
| | Debtor 2 only | Type of NONPRIORITY unsecured | claim: | |
| | Debtor 1 and Debtor 2 only | Student loans | | |
| | At least one of the debtors and another | Obligations arising out of a separat | ion agreement or divorce | |
| | Check if this claim relates to a | that you did not report as priority cla | | |
| | community debt | Debts to pension or profit-sharing p | plans, and other similar debts | |
| | Is the claim subject to offest? | _ | | |
| | No Yes | Other. SpecifyCredit Card or | Credit Use | |
| 4.9 | Citibank | Last 4 digits of account number _ | | \$ <u>907.00</u> |
| | Creditor's Name | | 2017 | |
| | PO Box 6241 | When was the debt incurred? | 2017 | |
| | Number Street | | | |
| | | As of the date you file, the claim is | : Check all that apply. | |
| | | Contingent | | |
| | Sioux Falls SD 57117 | Unliquidated | | |
| | City State Zip Code Who owes the debt? Check one. | Disputed | | |
| | | ш . | | |
| | Debtor 1 only | | | |
| | Debtor 2 only | Type of NONPRIORITY unsecured | claim: | |
| | Debtor 1 and Debtor 2 only | Student loans | | |
| | At least one of the debtors and another | Obligations arising out of a separat | | |
| | Check if this claim relates to a | that you did not report as priority cla | | |
| | community debt Is the claim subject to offest? | Debts to pension or profit-sharing p | olaris, and other similar debts | |
| | No | Other. Specify Credit Card or | Credit Use | |
| | Yes | Other: Specify Ordan out | Orealt ode | |
| 4.10 | COMENITY BANK/Labayant | Last 4 digits of account number | NULL | \$ 0.00 |
| 1.10 | Creditor's Name | <u> </u> | | |
| | Po Box 182789 | When was the debt incurred? | 1991-2008 | |
| | Number Street | | | |
| | | As of the date you file, the claim is: | · Check all that apply | |
| | | Contingent | . Shook all that apply. | |
| | Columbus OH 43218 | Unliquidated | | |
| | City State Zip Code | | | |
| | Who owes the debt? Check one. | Disputed | | |
| | Debtor 1 only | | | |
| | Debtor 2 only | Type of NONPRIORITY unsecured | claim: | |
| | Debtor 1 and Debtor 2 only | Student loans | | |
| | At least one of the debtors and another | Obligations arising out of a separat | ion agreement or divorce | |
| | Check if this claim relates to a | that you did not report as priority cla | | |
| | community debt | Debts to pension or profit-sharing p | plans, and other similar debts | |
| | Is the claim subject to offest? | <u></u> | | |
| | ■ No □ | Other. Specify Credit Card or | Credit Use | |
| 1 | Yes | | | |

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Case Number (if known) <u>Pagument</u> Yolanda Debtor 1

| Part 24 Your NONPRIORITY Unsecured Claims - Co | ntinuation Page | |
|--|---|--------------------|
| After listing any entries on this page, number them be | ginning with 4.4, followed by 4.5, and so forth. | Total Claim |
| 4.11 Illinois Department of Revenue | Last 4 digits of account number | <u>\$450.00</u> |
| Creditor's Name | 2012 | |
| PO Box 19044 | When was the debt incurred? 2013 | |
| Number Street | | |
| | As of the date you file, the claim is: Check all that apply. | |
| | Contingent | |
| Springfield IL 62794-9044 | Unliquidated | |
| City State Zip Code Who owes the debt? Check one. | Disputed | |
| Debtor 1 only | | |
| Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| Debtor 1 and Debtor 2 only | Student loans | |
| At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| Check if this claim relates to a | that you did not report as priority claims | |
| community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| Is the claim subject to offest? | - | |
| No Yes | Other. SpecifyTaxes - Federal, State/Local | |
| 4.12 IRS Priority Debt | Last 4 digits of account number | \$ _924.92 |
| Creditor's Name | When was the debt incurred? 2012 | |
| PO Box 7346 | When was the debt incurred? | |
| Number Street | | |
| | As of the date you file, the claim is: Check all that apply. | |
| | Contingent | |
| Philadelphia PA 19101 | Unliquidated | |
| City State Zip Code Who owes the debt? Check one. | Disputed | |
| Debtor 1 only | _ | |
| Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| Debtor 1 and Debtor 2 only | Student loans | |
| At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| Check if this claim relates to a | that you did not report as priority claims | |
| community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| Is the claim subject to offest? | | |
| No | Other. Specify Taxes - Federal, State/Local | |
| Yes | | |
| 4.13 IRS Priority Debt | Last 4 digits of account number | \$ <u>3,159.47</u> |
| Creditor's Name | When was the debt incurred? 2013 | |
| PO Box 7346 | When was the debt incurred? 2013 | |
| Number Street | | |
| | As of the date you file, the claim is: Check all that apply. | |
| Diri III II | Contingent | |
| Philadelphia PA 19101 | Unliquidated | |
| City State Zip Code Who owes the debt? Check one. | Disputed | |
| Debtor 1 only | _ | |
| Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| Debtor 1 and Debtor 2 only | Student loans | |
| At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| Check if this claim relates to a | that you did not report as priority claims | |
| community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| Is the claim subject to offest? | | |
| No | Other. Specify Taxes - Federal, State/Local | |
| □Yes | | |

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Case Number (if known) <u>Pagument</u> Yolanda Debtor 1

| Part 2: Your NONPRIORITY U | nsecured Claims - Continuation Page | | |
|--|---|-------------------------------------|--------------------|
| After listing any entries on this page | ge, number them beginning with 4.4, followed by 4 | 5, and so forth. | Total Claim |
| 4.14 Kohls/Capone | Last 4 digits of account number | er NULL | \$ 743.00 |
| Creditor's Name | | 1002 2016 | |
| N56 W 17000 Ridgewood D | When was the debt incurred? | 1992-2016 | |
| Number Street | | | |
| | As of the date you file, the claim | im is: Check all that apply. | |
| Manager Falls | Contingent | | |
| Menomonee Falls | WI 53051 Unliquidated | | |
| City Who owes the debt? Check one | State Zip Code Disputed | | |
| Debtor 1 only | | | |
| Debtor 2 only | Type of NONPRIORITY unsecu | ured claim: | |
| Debtor 1 and Debtor 2 only | Student loans | | |
| At least one of the debtors and | d another | paration agreement or divorce | |
| Check if this claim relates t | that you did not report as prior | rity claims | |
| community debt | | ring plans, and other similar debts | |
| Is the claim subject to offest? | | | |
| No | Other. Specify Credit Car | d or Credit Use | |
| Yes Lending CLUB CORP | | 7898 | \$ 2,770.00 |
| 4.15 Creditor's Name | Last 4 digits of account number | er 1090 | \$ <u>2,770.00</u> |
| 71 Stevenson St Ste 300 | When was the debt incurred? | 2015-2016 | |
| Number Street | | | |
| | | in in Obest all that and | |
| | As of the date you file, the clai | Im Is: Спеск ан that apply. | |
| San Francisco | CA 94105 Contingent | | |
| City | State Zip Code Unliquidated | | |
| Who owes the debt? Check one | Disputed | | |
| Debtor 1 only | | | |
| Debtor 2 only | Type of NONPRIORITY unsecu | ured claim: | |
| Debtor 1 and Debtor 2 only | ☐ Student loans | | |
| At least one of the debtors and | —————————————————————————————————————— | • | |
| Check if this claim relates t | | | |
| community debt Is the claim subject to offest? | Debts to pension or profit-sna | ring plans, and other similar debts | |
| No | Other. Specify Personal L | _oan | |
| Yes | Office: Opening | | |
| 4.16 Merrick BANK | Last 4 digits of account numb | er <u>NULL</u> | \$ <u>615.00</u> |
| Creditor's Name | | 2016-2016 | |
| Po Box 9201 | When was the debt incurred? | 2010-2010 | |
| Number Street | | | |
| | As of the date you file, the claim | im is: Check all that apply. | |
| Old Pathnaga | NY 11804 Contingent | | |
| Old Bethpage City | Unliquidated | | |
| Who owes the debt? Check one | State Zip Code Disputed | | |
| Debtor 1 only | | | |
| Debtor 2 only | Type of NONPRIORITY unsecu | ured claim: | |
| Debtor 1 and Debtor 2 only | Student loans | | |
| At least one of the debtors and | d another Obligations arising out of a se | paration agreement or divorce | |
| Check if this claim relates t | o a that you did not report as prior | rity claims | |
| community debt | | ring plans, and other similar debts | |
| Is the claim subject to offest? | <u>_</u> | | |
| No No | Other. Specify Credit Car | d or Credit Use | |

Schedule E/F: Creditors Who Have Unsecured Claims

Page 26 of 59 Case Number (if known) <u>Pagument</u> Yolanda Debtor 1

| Part 2# Your NONPRIORITY Unsecured Claims | s - Continuation Page | |
|--|---|--------------------|
| After listing any entries on this page, number the | m beginning with 4.4, followed by 4.5, and so forth. | Total Claim |
| 4.17 North Cash.com | Last 4 digits of account number | \$ <u>500.00</u> |
| Creditor's Name | When was the debt incurred 2 2016 | |
| PO Box 498 | When was the debt incurred? | |
| Number Street | | |
| | As of the date you file, the claim is: Check all that apply. | |
| | Contingent | |
| Hays MT 59527 | Unliquidated | |
| City State Zip Code Who owes the debt? Check one. | Disputed | |
| Debtor 1 only | | |
| Debtor 2 only | Type of NONPRIORITY unsecured claim: ☐ | |
| Debtor 1 and Debtor 2 only | Student loans | |
| At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| Check if this claim relates to a | that you did not report as priority claims | |
| community debt Is the claim subject to offest? | Debts to pension or profit-sharing plans, and other similar debts | |
| No | Other. Specify PayDay Loan | |
| Yes | Other: Specify | |
| 4.18 PLS Financial | Last 4 digits of account number | <u>\$_1,105.00</u> |
| Creditor's Name | 2040 | |
| 800 Jorie Blvd, 2nd Floor | When was the debt incurred? 2012 | |
| Number Street | | |
| | As of the date you file, the claim is: Check all that apply. | |
| | Contingent | |
| Oak Brook IL 60523 | Unliquidated | |
| City State Zip Code Who owes the debt? Check one. | Disputed | |
| Debtor 1 only | _ | |
| Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| Debtor 1 and Debtor 2 only | Student loans | |
| At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| Check if this claim relates to a | that you did not report as priority claims | |
| community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| Is the claim subject to offest? | | |
| No | Other. Specify PayDay Loan | |
| Yes A 10 Shell Credit | | A 745 00 |
| 4.19 | Last 4 digits of account number | \$ <u>745.00</u> |
| Creditor's Name PO Box 8406 | When was the debt incurred? 2016 | |
| Number Street | | |
| | A of the date was file the claim in Charle III that such | |
| | As of the date you file, the claim is: Check all that apply. | |
| Sioux Falls SD 57117 | Contingent | |
| City State Zip Code | Unliquidated | |
| Who owes the debt? Check one. | Disputed | |
| Debtor 1 only | | |
| Debtor 2 only | Type of NONPRIORITY unsecured claim: □ | |
| Debtor 1 and Debtor 2 only | Student loans | |
| At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| Check if this claim relates to a | that you did not report as priority claims | |
| community debt Is the claim subject to offest? | Debts to pension or profit-sharing plans, and other similar debts | |
| No | Other. Specify Credit Card or Credit Use | |
| Yes | Other. Specify Credit Gard of Credit Ose | |
| | | |

Page 27 of 59 Case Number (if known) <u>Pagument</u> Yolanda Debtor 1

| Part 24 Your NONPRIORITY Unsecured Claims - | Continuation Page | | | | | |
|---|---|--------------------|--|--|--|--|
| After listing any entries on this page, number them | beginning with 4.4, followed by 4.5, and so forth. | Total Claim | | | | |
| 4.20 Silver Cloud Loan | Last 4 digits of account number | \$ <u>1,000.00</u> | | | | |
| Creditor's Name | When was the debt incurred? 2016 | | | | | |
| 635 E. Highway 20 | When was the debt incurred? | | | | | |
| Number Street | | | | | | |
| | As of the date you file, the claim is: Check all that apply. | | | | | |
| United also | Contingent | | | | | |
| Upper Lake CA 95485 | Unliquidated | | | | | |
| City State Zip Code Who owes the debt? Check one. | Disputed | | | | | |
| Debtor 1 only | | | | | | |
| Debtor 2 only | Type of NONPRIORITY unsecured claim: | | | | | |
| Debtor 1 and Debtor 2 only | Student loans | | | | | |
| At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | | | | | |
| Check if this claim relates to a | that you did not report as priority claims | | | | | |
| community debt | Debts to pension or profit-sharing plans, and other similar debts | | | | | |
| Is the claim subject to offest? | | | | | | |
| No | Other. Specify PayDay Loan | | | | | |
| Yes Spoton Loop | | \$ 500.00 | | | | |
| Spoton Loan | Last 4 digits of account number | <u>\$_500.00</u> | | | | |
| Creditor's Name PO Box 6243 | When was the debt incurred? 2016 | | | | | |
| Number Street | | | | | | |
| | As of the date was file the state to Ot at all the tool | | | | | |
| | As of the date you file, the claim is: Check all that apply. | | | | | |
| Logan UT 84341 | Contingent | | | | | |
| City State Zip Code | Unliquidated | | | | | |
| Who owes the debt? Check one. | Disputed | | | | | |
| Debtor 1 only | | | | | | |
| Debtor 2 only | Type of NONPRIORITY unsecured claim: | | | | | |
| Debtor 1 and Debtor 2 only | Student loans | | | | | |
| At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | | | | | |
| Check if this claim relates to a | that you did not report as priority claims | | | | | |
| community debt Is the claim subject to offest? | Debts to pension or profit-sharing plans, and other similar debts | | | | | |
| No | Pay o y PayDay Loan | | | | | |
| Yes | Other. Specify PayDay Loan | | | | | |
| 4.22 Syncb/CARCARE ONE | Last 4 digits of account number NULL | \$ _597.00 | | | | |
| Creditor's Name | | | | | | |
| C/O Po Box 965036 | When was the debt incurred? 2015-2016 | | | | | |
| Number Street | | | | | | |
| | As of the date you file, the claim is: Check all that apply. | | | | | |
| | Contingent | | | | | |
| Orlando FL 32896 | Unliquidated | | | | | |
| City State Zip Code Who owes the debt? Check one. | Disputed | | | | | |
| Debtor 1 only | | | | | | |
| Debtor 2 only | Type of NONPRIORITY unsecured claim: | | | | | |
| Debtor 1 and Debtor 2 only | Student loans | | | | | |
| At least one of the debtors and another | Dbligations arising out of a separation agreement or divorce | | | | | |
| | that you did not report as priority claims | | | | | |
| Check if this claim relates to a community debt | Debts to pension or profit-sharing plans, and other similar debts | | | | | |
| Is the claim subject to offest? | | | | | | |
| No | Other. Specify Credit Card or Credit Use | | | | | |
| Yes | | | | | | |

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Page 28 of 59 Case Number (if known) **Pocument** Yolanda Debtor 1

GA 30010

State Zip Code

List Others to Be Notified for a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. GC Services On which entry in Part 1 or Part 2 list the original creditor? Name PO Box 5220 Line 9 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Number San Antonio TX 78201 Last 4 digits of account number _____ City State Zip Code Vital Recovery Services, Inc. On which entry in Part 1 or Part 2 list the original creditor? Name PO Box 923747 Line 14 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Number Street

Last 4 digits of account number _____ 7898_____

Record # 724783

Norcross City

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Case Number (if known) Pagument

Yolanda Debtor 1

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

| | | | Total claim |
|-----------------------------|--|------------|---------------------|
| Total claims from Part 1 | 6a. Domestic support obligations | 6a. | \$0.00 |
| | 6b. Taxes and Certain other debts you owe the government | 6b. | \$4,050.00 |
| | 6c. Claims for death or personal injury while you were intoxicated | 6c. | \$0.00 |
| | 6d. Other. Add all other priority unsecured claims. Write that amount here. | 6d. | \$0.00 |
| | 6e. Total. Add lines 6a through 6d. | 6e. | \$ |
| | | | |
| | | | Total claim |
| Total claims from Part 2 | 6f. Student loans | 6f. | Total claim \$0.00 |
| | 6f. Student loans 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6f. 6g. | |
| | 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority | | \$0.00 |
| | 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other | 6g. | \$ |

| | | Caso 17 | | Filed 05/21/17 | tered 05/31/17 13:53:11 | Desc Main |
|-------------|-----------------------------|------------------------|--|-------------------------------------|--|---------------------|
| Fill | l in this in | formation to ident | ify your case: | | 0 of 59 | |
| De | ebtor 1 | Yolanda | | Ellington-Reese | | |
| _ | | First Name | Middle Name | Last Name | | |
| | ebtor 2 ouse, if filing) | First Name | Middle Name | Last Name | | |
| Un | nited States | Bankruptcy Court for | the : <u>NORTHERN</u> District of _ | ILLINOIS | | |
| | ase Number | | ale : IVOIVITIE/UV _ Blouist of _ | (State) | | Check if this is an |
| | known) | | | | | amended filing |
| Offi | cial F | orm 106G | | | | |
| Sch | edule | G: Executo | ory Contracts and | Unexpired Leases | | 12/1 |
| nform | nation. If n | nore space is need | | e, fill it out, number the entries, | qually responsible for supplying correct and attach it to this page. On the top of a | ny |
| 1. D | o you hav | e any executory c | ontracts or unexpired leases | ? | | |
| | No. Ch | eck this box and su | ubmit this form to the court with | n your other schedules. You have | e nothing else to report on this form. | |
| | Yes. Fil | I in all of the inform | ation below even if the contract | cts or leases are listed in Sched | ule A/B: Property (Official Form 106A/B) | |
| | | | | | | |
| | | | | | state what each contract or lease is for (f booklet for more examples of executory co | |
| | nexpired le | | production of the modern of th | | account to more examples of executery co | |
| ı | Person or | company with wh | om you have the contract or | lease | State what the contract or lease | e is for |
| | | | - | | | |
| 2.1 | | | | | | |
| | Name | | | | | |
| | Number | Street | | | | |
| | City | | State Zip | O Code | | |
| 2.2 | | | | | | |
| 2.2 | Name | | | | | |
| | | | | | | |
| | Number | Street | | | | |
| | City | | State Zip |) Code | | |
| 2.3 | | | | | | |
| | Name | | | | | |
| | | | | | | |
| | Number | Street | | | | |
| | City | | State Zip | Code | | |
| 24 | | | | | | |
| 2.4 | Name | | | | | |
| | | | | | | |
| | Number | Street | | | | |
| | City | | State Zip | Code | | |
| 2.5 | | | | | | |
| | Name | | | | | |
| | | | | | | |
| | Number | Street | | | | |
| | City | | State Zip | Code | | |

| Fill in this in | formation to iden | tify your case: | |
|---------------------|---------------------|---------------------------------------|---------------------|
| Debtor 1 | Yolanda | | Ellington-Reese |
| | First Name | Middle Name | Last Name |
| Debtor 2 | - | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name |
| United States | Bankruptcy Court fo | r the : <u>NORTHERN</u> District of _ | ILLINOIS (State) |
| Case Number | | | — (Oldic) |
| (If known) | | | |

Official Form 106H

Schedule H: Your Codebtors 12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

| any Ao | dditional Pa | ages, write your name and | I case number (if known). Answ | er every questi | on. |
|---------------|--------------|-------------------------------------|--|-----------------|--|
| 1. D c | o you have | any codebtors? (If you are | e filing a joint case, do not list eith | ner spouse as a | codebtor.) |
| | No. | | | | |
| | Yes | | | | |
| | | | in a community property state of evada, New Mexico, Puerto Rico, | | ammunity property states and territories include gton, and Wisconsin.) |
| | No. Go t | to line 3. | | | |
| | Yes. Did | I your spouse, former spous | se, or legal equivalent live with yo | ou at the time? | |
| | = | . Inwhich community state | or territory did you live? | · | Fill in the name and current address of that person. |
| | Name | of your spouse, former spouse or le | egal equivalent | | |
| | Numb | er Street | | | |
| | City | | State | Zip Cod | 9 |
| S | | F, or Schedule G to fill out | Column 2. | | Column 2: The creditor to whom you owe the debt |
| 0.4 | | | | | Check all schedules that apply: |
| 3.1 | | | | | Schedule D, line |
| | Name | | | | Schedule E/F, line |
| | Number | Street | | | Schedule G, line |
| | City | | State | Zip Code | |
| 3.2 | | | | | Schedule D, line |
| | Name | | | | Schedule E/F, line |
| | Number | Street | | | Schedule G, line |
| | City | | State | Zip Code | |
| 3.3 | | | | | Schedule D, line |
| | Name | | | | Schedule E/F, line |
| | Number | Street | | | Schedule G, line |
| | City | | State | Zip Code | |

Official Form 106H Record # 724783 Schedule H: Your Codebtors Page 1 of 1

| Fill in this ir | nformation to identi | ify your case: | | | |
|--------------------------|----------------------|----------------|------------|-------|--------------------------------------|
| Debtor 1 | Yolanda | | Ellington- | Reese | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | |
| | | | | | |
| Case Numbe (If known) | r | | | | Check if this is: An amended filing |
| | r | | _ | | An amended filing |
| | r | | _ | | |

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pa | Tt 1: Describe Employment | | | | |
|----|---|---|--|--------------|-----------------------------------|
| 1. | Fill in your employment information | | Debtor 1 | | Debtor 2 or non-filing spouse |
| | If you have more than one job, attach a separate page with information about additional employers. | Employment status | X Employed Not employed | | Employed Not employed |
| | Include part-time, seasonal, or self-employed work. | Occupation | ОВТ | | |
| | Occupation may Include student or homemaker, if it applies. | Employers name | Ingalls Hospital | | |
| | | Employers address | 71 W. 156th St., S Harvey, IL 60426 | te. 500 | 3 |
| | | How long employed there? | Since 1/1/2000 | | |
| Pa | rt 2: Give Details About Monthl | y Income | | | |
| | Estimate monthly income as of the spouse unless you are separated. If you or your non-filing spouse has lines below. If you need more space | ve more than one employer, comb | ine the information for a | | |
| | | | | For Debtor 1 | For Debtor 2 or non-filing spouse |
| 2. | | y and commissions (before all pa calculate what the monthly wage w | - | \$3,357.49 | \$0.00 |
| 3. | Estimate and list monthly overti | me pay. | | \$0.00 | \$0.00 |
| 4. | Calculate gross income. Add line | e 2 + line 3. | | \$3,357.49 | \$0.00 |

Official Form 106l Record # 724783 Schedule I: Your Income Page 1 of 2

Document Ellington-Reese Page 33 of 59 Yolanda Debtor 1 Case Number (if known)

Last Name

First Name

Middle Name

| | | | | For Debtor 1 | | For Debtor 2 or non-filing spouse | | | |
|---------------|--------------|---|---------------|---------------------------|---------|-----------------------------------|-----|--------------|--|
| | Сору | y line 4 here | 4. | \$3,357.49 | | \$0.00 |] | | |
| 5. L | ist all | payroll deductions: | | | | | | | |
| | 5a. T | ax, Medicare, and Social Security deductions | 5a. | \$678.95 | | \$0.00 | | | |
| | 5b. N | Mandatory contributions for retirement plans | 5b. | \$134.29 | | \$0.00 | | | |
| | 5c. V | oluntary contributions for retirement plans | 5c. | \$0.00 | | \$0.00 | | | |
| | 5d. F | Required repayments of retirement fund loans | 5d. | \$0.00 | | \$0.00 | | | |
| | 5e. l | nsurance | 5e. | \$216.67 | | \$0.00 | | | |
| | 5f. C | Domestic support obligations | 5f. | \$0.00 | | \$0.00 | | | |
| | 5g. L | Inion dues | 5g. | \$0.00 | | \$0.00 | | | |
| | 5h. C | Other deductions. Specify: Life Insurance(D1), | 5h. | \$3.40 | | \$0.00 | | | |
| 6. A | d the | payroll deductions . Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g +5h. | 6. | \$1,033.30 | | \$0.00 | _ | | |
| 7. C a | alcula | te total monthly take-home pay. Subtract line 6 from line 4. | 7. | \$2,324.18 | | \$0.00 | | | |
| 8. Li | st all | other income regularly received: | | | | | | | |
| | 8a. | Net income from rental property and from operating a business, | | | | | | | |
| | | profession, or farm | | | | | | | |
| | | Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total | | | | | | | |
| | | monthly net income. | 8a. | \$0.00 | | \$0.00 | | | |
| | 8b. | Interest and dividends | 8b. | \$0.00 | | \$0.00 | | | |
| | 8c. | Family support payments that you, a non-filing spouse, or a | 8c. | \$ 0.00 | | \$ 0.00 | | | |
| | | dependent regularly receive | | | | | | | |
| | | Include alimony, spousal support, child support, maintenance, divorce | | | | | | | |
| | | settlement, and property settlement. | | | | | | | |
| | 8d. | Unemployment compensation | 8d. | \$0.00 | | \$0.00 | | | |
| | 8e. | Social Security | 8e. | \$0.00 | | \$0.00 | | | |
| | 8f. | Other government assistance that you regularly receive | 8f. | \$0.00 | | \$0.00 | | | |
| | | Include cash assistance and the value (if known) of any non-cash | | | | | | | |
| | | assistance that you receive, such as food stamps (benefits under the | | | | | | | |
| | | Supplemental Nutrition Assistance Program) or housing subsidies. | | | | | | | |
| | | Specify: | | | | | | | |
| | 8g. | Pension or retirement income | 8g. | \$0.00 | | \$0.00 | | | |
| | 8h. | Other monthly income. Specify: | 8h. | \$0.00 | | \$0.00 | | | |
| 9. | Add | all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h. | 9. | \$0.00 | | \$0.00 | | | |
| 10. | Calc | ulate monthly income. Add line 7 + line 9. | 10. | \$2,324.18 | + | \$0.00 | = | \$2,324.18 | |
| | Add | the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | | . , | | , , , , , | L | , | |
| 11. | State | e all other regular contributions to the expenses that you list in <i>Schedu</i> . | le J. | | | | | | |
| | | de contributions from an unmarried partner, members of your household, y | | ents, your roommates, a | ınd | | | | |
| | othe | friends or relatives. | | | | | | | |
| | | ot include any amounts already included in lines 2-10 or amounts that are | | | in S | Schedule J. | | | |
| | Specify: | | | | | | | | |
| 12. | Add | the amount in the last column of line 10 to the amount in line 11. The re | sult is the c | ombined monthly income | €. | | г | | |
| | | e that amount on the Summary of Schedules and Statistical Summary of C | | ities and Related Data, i | f it ap | pplies | 12. | \$2,324.18 | |
| 13. | | ou expect an increase or decrease within the year after you file this for | n? | | | | | | |
| | X | | | | | | | | |
| | | Yes. Explain: | | | | | | | |
| | | | | | | | | | |

| Fill in this in | formation to identify your | case: | | | | | | |
|---------------------------------|---|---------------------------|--|---|--|-----------------|-------------------------------|--------|
| Debtor 1 | Yolanda | | Ellington-Reese | Chec | ck if this is: | | | |
| | First Name | Middle Name | Last Name | | | | | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name | | A supplement income as of the come a | | -petition chapter 13 | |
| United States | Bankruptcy Court for the : N | ORTHERN DISTRICT C | F ILLINOIS | | | | | |
| Case Number | • | | _ | | MM / DD / YY | YY | | |
| | 1001 | | | — , | A separate fili | ng for Debtor | 2 because Debtor 2 | |
| <u>Oπicial F</u> | orm 106J | | | | maintains a se | eparate house | hold. | |
| Schedul | e J: Your Expe | enses | | | | | | 12/14 |
| | | | le are filing together, both a ne top of any additional pag | | | | | |
| Part 1: | Describe Your Household | | | | | | | |
| 1. Is this a joi | nt case? | | | | | | | |
| | Go to line 2. | | | | | | | |
| Yes. I | Does Debtor 2 live in a sep | arate nousenoid? | | | | | | |
| | <u></u> | le a separate Schedul | e J. | | | | | |
| 2. Do you h | nave dependents? | X No | | | | | | |
| _ | • | | this information for | Dependent's relati Debtor 1 or Debto | | Dependent's age | Does dependent live with you? | |
| Debtor 2 | st Debtor 1 and | | this information for dent | | | | X No | |
| | tate the dependents' | | | | | | Yes | |
| names. | | | | | | | x No | |
| | | | | | | | Yes | |
| | | | | | | | X No | |
| | | | | | | | Yes | |
| | | | | | | | Yes | |
| | | | | | | | x No | |
| | | | | | | | Yes | |
| 3. Do your | expenses include | X No | | | | | | |
| | s of people other than and your dependents? | Yes | | | | | | |
| Part 2: | estimate Your Ongoing Mont | hly Expenses | | | | | | |
| | | | ess you are using this form | as a supplement in a | Chapter 13 cas | e to report | | |
| expenses as o the applicable | | cy is filed. If this is a | supplemental Schedule J, o | check the box at the t | op of the form a | ind fill in | | |
| Include expens | ses paid for with non-cash | - | = | | | | | |
| of such assist | ance and have included it | on Schedule I: Your | Income (Official Form 106l.) | | | Y | our expenses | |
| | | enses for your resid | ence. Include first mortgage | payments and | | 4 | \$50 | 00.00 |
| | for the ground or lot. | | | | | 4 | \$30 | 0.00 |
| | al estate taxes | | | | | 4a. | \$ | \$0.00 |
| | operty, homeowner's, or ren | nter's insurance | | | | 4b. | | \$0.00 |
| | me maintenance, repair, an | | | | | 4c. | \$5 | 50.00 |
| 4d. Ho | meowner's association or c | ondominium dues | | | | 4d. | \$ | 00.00 |
| | | | | | | | | |

Yolanda

Middle Name

First Name

Debtor 1

Document Ellington-Reese

Last Name

Page 35 of 59

Case Number (if known)

Your expenses \$0.00 5 Additional Mortgage payments for your residence, such as home equity loans 6. **Utilities:** \$0.00 6a. 6a. Electricity, heat, natural gas \$0.00 6b. Water, sewer, garbage collection \$200.00 Telephone, cell phone, internet, satellite, and cable service \$ 0.00 Other. Specify: 6d. \$400.00 7. 7. Food and housekeeping supplies \$0.00 8. 8. Childcare and children's education costs \$125.00 9. Clothing, laundry, and dry cleaning 10. \$85.00 10. Personal care products and services \$100.00 11. Medical and dental expenses 11. \$535.00 **Transportation.** Include gas, maintenance, bus or train fare. 12. Do not include car payments. \$50.00 13. Entertainment, clubs, recreation, newspapers, magazines, and books \$0.00 14. Charitable contributions and religious donations 14. 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. \$0.00 15a. 15a Life insurance \$0.00 15b. Health insurance 15b. \$108.00 15c. Vehicle insurance 15c. \$0.00 15d. 15d. Other insurance. Specify: 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: Federal or State Tax Repayments \$200.00 16 17. Installment or lease payments: \$0.00 17a. 17a. Car payments for Vehicle 1 \$0.00 17b. Car payments for Vehicle 2 17b \$0.00 17c. 17c. Other. Specify:_ \$0.00 17d. Other. Specify: 17d. 18. Your payments of alimony, maintenance, and support that you did not report as deducted \$0.00 from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. 19. Other payments you make to support others who do not live with you. \$0.00 19. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a. \$ 0.00 20b. \$ 0.00 20b. Real estate taxes \$ 0.00 20c. Property, homeowner's, or renter's insurance 20c. \$ 0.00 20d. 20d. Maintenance, repair, and upkeep expenses \$ 0.00 20e 20e. Homeowner's association or condominium dues

Official Form 106J Record # 724783 Schedule J: Your Expenses Page 2 of 3

Case 17-16732 Doc 1 Filed 05/31/17 Entered 05/31/17 13:53:11 Desc Main Document Page 36 of 59 Case Number (if known)

Yolanda Debtor 1 Case Number (if known) _ First Name Middle Name Last Name \$5.00 21. Other. Specify: ___Postage/Bank Fees (\$5.00), 21. \$2,358.00 22.. Your monthly expense: Add lines 4 through 21. 22. The result is your monthly expenses. 23. Calculate your monthly net income. \$2,324.18 23a. 23a. Copy line 12 (your comibined monthly income) from Schedule I. \$2,358.00 23b. Copy your monthly expenses from line 22 above. 23b.--\$33.82 23c. Subtract your monthly expenses from your monthly income. 23c. The result is your monthly net income. 24. Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage? X No Explain Here: Yes.

Official Form 106J Record # 724783 Schedule J: Your Expenses Page 3 of 3

| Fill in this in | ill in this information to identify your case: | | | |
|---------------------------|--|-----------------------------------|---------------------|--|
| Debtor 1 | Yolanda | | Ellington-Reese | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | - | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | |
| United States | Bankruptcy Court for | the : <u>NORTHERN</u> District of | ILLINOIS (State) | |
| Case Number (If known) | | | _ | |

Official Form 106 Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Sign Below | |
|---|---|
| Did you pay or agree to pay someone who is NOT a | an attorney to help you fill out bankruptcy forms? |
| Yes. Name of Person | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |
| | |
| Under penalty of perjury, I declare that I have read correct. | the summary and schedules filed with this declaration and that they are true and |
| ★ /s/ Yolanda Ellington-Reese | _ |
| Signature of Debtor 1 | Signature of Debtor 2 |
| Date 05/24/2017 MM / DD / YYYY | DateMM / DD / YYYY |

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| Boodinent Tade do Ci 33 | | | |
|-------------------------|--------------------|--------------------------------|------------------|
| Fill in this in | formation to ide | ntify your case: | |
| | | | |
| | V-11- | | Ellinosten Deser |
| Debtor 1 | Yolanda | | Ellington-Reese |
| | First Name | Middle Name | Last Name |
| | | | |
| Debtor 2 | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name |
| | | | |
| United States | Bankruptcy Court f | for the : NORTHERN District of | ILLINOIS |
| | . , | | (State) |
| Case Number | r | | |
| (If known) | | | |
| | | | |
| | | | |

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct

| nformation. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. | | | | | |
|--|----------------------------|--------------|-------------------------------|--|--|
| 21141: Give Details About Your Marital Status and Where You Lived Before | | | | | |
| 01. What is your current marital status? | | | | | |
| Married | | | | | |
| Not married | | | | | |
| 02 During the last 3 years, have you lived anywhere other tha | n where you live no | w? | | | |
| No. | a mat Saat ada ada ada a | The second | | | |
| Yes. List all of the places you lived in the last 3 years. Do | o not include where y | ou live now. | | | |
| Debtor 1 | Dates Debtor 1 lived there | Debtor 2: | Dates Debtor 2 lived there | | |
| lived there lived there lived there | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
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| | | | | | |

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Case Number (if known) __

| | First Name Middle Name | E Last Name | | | |
|----|--|---|---|---|---|
| 04 | Did you have any income from employmer Fill in the total amount of income you receil f you are filing a joint case and you have in | ved from all jobs and all business | es, including part-time activities | es. | |
| | ☐ No. Yes. Fill in the details | | | | |
| | | Debtor 1 | | Debtor 2 | |
| | | Sources of income Check all that apply | Gross income (before deductions and exclusions) | Sources of income Check all that apply | Gross income (before deductions and exclusions) |
| | From January 1 of current year until | Wages, commissions, | \$15,496 | Wages, commissions, | |
| | the date you filed for bankruptcy: | bonuses, tips Operating a business | | bonuses, tips Operating a business | |
| | For last calendar year: | Wages, commissions, | \$41,021 | Wages, commissions, | |
| | (January 1 to December 31, 2016) | bonuses, tips Operating a business | | bonuses, tips Operating a business | |
| | For the calendar year before that: | Wages, commissions, | \$37,715 | Wages, commissions, | |
| | (January 1 to December 31, 2015) | bonuses, tips Operating a business | | bonuses, tips Operating a business | |
| | winnings. If you are filing a joint case and y List each source and the gross income from No. Yes. Fill in the details | • | | | |
| | | Debtor 1 | | Debtor 2 | |
| | | Sources of income Describe below. | Gross income (before deductions and exclusions) | Sources of income Describe below. | Gross income (before deductions and exclusions) |
| | For last calendar year: | Gambling winnings | \$19,887 | | |
| | (January 1 to December 31, 2016) | | | | |
| | For last calendar year: | Gambling winnings | \$19,887 | | |
| | (January 1 to December 31, 2015) | | | | |
| _ | | | | | |
| | Part 3: List Certain Payments You Made E | зетоге тои гней тог ванкгиртсу | | | |
| | | | | | |
| | | | | | |
| | | | | | |

Yolanda

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Case Number (if known) _

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| | First Name middle Name | Last Name | | | | |
|----|--|--|---|---|---------------------------------|--|
| 06 | Are either Debtor 1's or Debtor 2's debts primarily cons | sumer debts? | | | | |
| | No. Neither Debtor 1 nor Debtor 2 has primarily corning the 90 days before you filed for bankrupto | , family, or househ | nold purpose." | | is | |
| | ☐ No. Go to line 7. | | | | | |
| | Yes. List below each creditor to whom you paid a total of \$6,225* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/16 and every 3 years after that for cases filed on or after the date of adjustment. | | | | | |
| | Yes. Debtor 1 or Debtor 2 or both have primarily co During the 90 days before you filed for bankrupt | | ny creditor a total of \$60 | 00 or more? | | |
| | No. Go to line 7. | | | | | |
| | Yes. List below each creditor to whom you p | | | • | | |
| | creditor. Do not include payments for domes | | • | port and | | |
| | alimony. Also, do not include payments to ar | attorney for this I | oankruptcy case. | | | |
| | | Dates of payments | Total amount paid | Amount you still | owe Was this payment for | |
| 07 | Within 1 year before you filed for bankruptcy, did you mak Insiders include your relatives; any general partners; relatives corporations of which you are an officer, director, person i agent, including one for a business you operate as a sole such as child support and alimony. No. Yes. List all payments to an insider. | ives of any genera n control, or owne proprietor. 11 U.S | al partners; partnerships r of 20% or more of the .C. § 101. Include payn | s of which you are a gener ir voting securities; and ar nents for domestic suppor | ny managing t obligations, | |
| | | Dates of payment | Total amount paid | Amount you still owe | Reason for this payment | |
| 08 | Within 1 year before you filed for bankruptcy, did you mak an insider? Include payments on debts guaranteed or cosigned by an No. Yes. List all payments to an insider. | | r transfer any property o | on account of a debt that I | penefited | |
| | Tes. List all payments to an insider. | Dates of | Total amount | Amount you still | Reason for this payment | |
| | | payment | paid | Amount you still owe | Include creditor's name | |
| | Identify Land actions Banacaccions and Especial | | | | | |
| | Within 1 year before you filed for bankruptcy, were you a p List all such matters, including personal injury cases, sma modifications, and contract disputes. No. | party in any lawsu | | | rt or custody | |
| | Yes. Fill in the details. | | | | | |
| 10 | Within 1 year before you filed for bankruptcy, was any of y | ture of the case your property repo | Court or ssessed, foreclosed, ga | | Status of the case , or levied? | |
| | Check all that apply and fill in the details below. No. Go to line 11 | | | | | |
| | Yes. Fill in the information below. | | | | | |
| | | | | | | |
| | | | | | | |

Yolanda

Case 17-16732 Doc 1 Filed 05/31/17 Entered 05/31/17 13:53:11 Desc Main Page 41 of 59 Document Debtor 1 Yolanda Ellington-Reese Case Number (if known) First Name Middle Name Last Name Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? No. Go to line 11 Yes. Fill in the information below. 12 Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? ☐ Yes. **List Certain Gifts and Contributions** Part 5: 13 Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? No. Yes. Fill in the details for each gift. 14 Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? Yes. Fill in the details for each gift.

| P | art 6: | List Certain Losses |
|---|----------|--|
| 5 | Within ' | l year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or g? |
| | No. | Fill in the details for each gift. |

Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition?

Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.

No.

Yes. Fill in the details

List Certain Payments or Transfers

| Party Contact Info | Description and value of any property transferred | Date payment or transfer | Amount of payment |
|---------------------------|---|--------------------------|-------------------|
| Geraci Law L.L.C. | | | \$1,000.00 |
| 55 E. Monroe Street #3400 | | | |
| Chicago,IL 60603 | | | |
| | | | |

| Party Contact Info | Description and value of any property transferred | Date payment or transfer | Amount of payment |
|---|---|--------------------------|-------------------|
| Hananwill Credit Counseling 115 N. Cross St. Robinson, IL 62454 | Credit Counseling Services | 2017 | \$25.00 |

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Case Number (if known) __

| | First Name N | fiddle Name | Last Name | | | | |
|----|---|-------------------------------------|---|---|--|--|--|
| 17 | Within 1 year before you filed for promised to help you deal with yo Do not include any payment or tra | our creditors or to | make payments to your cre | | fer any property to any | rone who | |
| | No. Yes. Fill in the details. | | | | | | |
| 18 | Within 2 years before you filed for transferred in the ordinary course Include both outright transfers an Do not include gifts and transfers | of your busines d transfers made | s or financial affairs? as security (such as the gra | inting of a security intere | | | |
| | ■ No. Yes. Fill in the details for each of | gift. | | | | | |
| 19 | Within 10 years before you filed for beneficiary? (These are often call | | | o a self-settled trust or s | similar device of which | you are a | |
| | No. Yes. Fill in the details for each to | gift. | | | | | |
| F | art 8: List Certain Financial Acco | ounts, Instruments | , Safe Deposit Boxes, and Sto | age Units | | | |
| 20 | Within 1 year before you filed for sold, moved, or transferred? Include checking, savings, money houses, pension funds, cooperati | / market, or othe | financial accounts; certifica | ites of deposit; shares in | | | |
| | No. | | | | | | |
| | Yes. Fill in the details. | | | | 5. | | |
| | | Last 4 | digits of account number | Type of account or instrument | Date account was closed, sold, moved, or transferred | Last balance before closing or transfer | |
| | Great Lakes Credit Union | XXX · | - <u>1750</u> | Checking Savings Money market Brokerage Other | March 2017 | (994.43) | |
| | | | | | | | |
| 21 | Do you now have, or did you have cash, or other valuables? | e within 1 year be | fore you filed for bankruptcy | , any safe deposit box o | r other depository for s | securities, | |
| | No. Yes. Fill in the details. | | | | | | |
| | | Who e | lse had access to it? | Describe the conte | nts | Do you still have it? | |
| 22 | Have you stored property in a sto | rage unit or place | e other than your home withi | n 1 year before you filed | for bankruptcy? | nave it. | |
| | No. | | | | | | |
| | Yes. Fill in the details. | Who e | lse has or had access to it? | Describe the conte | nts | Do you still | |
| | ants: | or Control for Son | acono Elco | | | have it? | |
| 23 | Do you hold or control any proper for someone. | | | perty you borrowed from | n, are storing for, or hol | d in trust | |
| | No. ☐ Yes. Fill in the details. | | | | | | |
| | _ | Where | is the property? | Describe the prope | rty | Value | |
| | | | | | | | |

Yolanda

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Last Name

Document Ellington-Reese Yolanda

Middle Name

Debtor 1

First Name

Case Number (if known) _

| Pa | art 10: Give Details About Environmental In | formation | | | |
|-----|--|--|---|--------------------|--|
| For | For the purpose of Part 10, the following definitions apply: | | | | |
| | Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. | | | | |
| | Site means any location, facility, or propert it or used to own, operate, or utilize it, inclu | = · · · · · · · · · · · · · · · · · · · | whether you now own, operate, or utilize | • | |
| | Hazardous material means anything an env substance, hazardous material, pollutant, c | | ste, hazardous substance, toxic | | |
| Rep | port all notices, releases, and proceedings t | hat you know about, regardless of when t | ney occurred. | | |
| 24 | Has any governmental unit notified you that | at you may be liable or potentially liable ur | nder or in violation of an environmental la | w? | |
| | No. | | | | |
| | Yes. Fill in the details. | | | | |
| | | Governmental unit | Environmental law, if you know it | Date of notice | |
| 25 | Have you notified any governmental unit o | f any release of hazardous material? | | | |
| | No. | | | | |
| | Yes. Fill in the details. | | | | |
| | | Governmental unit | Environmental law, if you know it | Date of notice | |
| 26 | Have you been a party in any judicial or ad | ministrative proceeding under any environ | nmental law? Include settlements and ord | lers. | |
| | No. | | | | |
| | Yes. Fill in the details. | | N | 21.1 | |
| | | Court or agency | Nature of the case | Status of the case | |
| | | | | | |
| Pε | Give Details About Your Business or | Connections to Any Business | | | |
| | Give Details About Your Business or Within 4 years before you filed for bankrup | • | of the following connections to any busin | ess? | |
| | Within 4 years before you filed for bankrup | • | | ess? | |
| | Within 4 years before you filed for bankrup ☐ A sole proprietor or self-employed i | tcy, did you own a business or have any o | ner full-time or part-time | ess? | |
| | Within 4 years before you filed for bankrup A sole proprietor or self-employed i A member of a limited liability comp | otcy, did you own a business or have any of the control of the con | ner full-time or part-time | ess? | |
| | Within 4 years before you filed for bankrup A sole proprietor or self-employed i A member of a limited liability comp A partner in a partnership An officer, director, or managing ex | otcy, did you own a business or have any on a trade, profession, or other activity, eithory (LLC) or limited liability partnership (ecutive of a corporation | ner full-time or part-time | ess? | |
| | Within 4 years before you filed for bankrup A sole proprietor or self-employed i A member of a limited liability comp | otcy, did you own a business or have any on a trade, profession, or other activity, eithory (LLC) or limited liability partnership (ecutive of a corporation | ner full-time or part-time | ess? | |
| | Within 4 years before you filed for bankrup A sole proprietor or self-employed i A member of a limited liability comp A partner in a partnership An officer, director, or managing ex | etcy, did you own a business or have any of a trade, profession, or other activity, eith oany (LLC) or limited liability partnership (ecutive of a corporation | ner full-time or part-time | ess? | |
| | Within 4 years before you filed for bankrup A sole proprietor or self-employed i A member of a limited liability comp A partner in a partnership An officer, director, or managing ex An owner of at least 5% of the votin | etcy, did you own a business or have any of n a trade, profession, or other activity, eithory (LLC) or limited liability partnership (ecutive of a corporation g or equity securities of a corporation art 12. | ner full-time or part-time | ess? | |
| 27 | Within 4 years before you filed for bankrup A sole proprietor or self-employed i A member of a limited liability comp A partner in a partnership An officer, director, or managing ex An owner of at least 5% of the votin | otcy, did you own a business or have any on a trade, profession, or other activity, eithouny (LLC) or limited liability partnership (ecutive of a corporation g or equity securities of a corporation art 12. | ner full-time or part-time | | |
| 27 | Within 4 years before you filed for bankrup A sole proprietor or self-employed i A member of a limited liability comp A partner in a partnership An officer, director, or managing ex An owner of at least 5% of the votin No. None of the above applies. Go to Pa Yes. Check all that apply above and fill in | otcy, did you own a business or have any on a trade, profession, or other activity, eithouny (LLC) or limited liability partnership (ecutive of a corporation g or equity securities of a corporation art 12. | ner full-time or part-time | | |
| 27 | Within 4 years before you filed for bankrup A sole proprietor or self-employed i A member of a limited liability comp A partner in a partnership An officer, director, or managing ex An owner of at least 5% of the votin No. None of the above applies. Go to Pa Yes. Check all that apply above and fill in Within 2 years before you filed for bankrup institutions, creditors, or other parties. | otcy, did you own a business or have any on a trade, profession, or other activity, eithouny (LLC) or limited liability partnership (ecutive of a corporation g or equity securities of a corporation art 12. In the details below for each business. | ner full-time or part-time | | |
| 27 | Within 4 years before you filed for bankrup A sole proprietor or self-employed i A member of a limited liability comp A partner in a partnership An officer, director, or managing ex An owner of at least 5% of the votin No. None of the above applies. Go to Pa Yes. Check all that apply above and fill in Within 2 years before you filed for bankrup institutions, creditors, or other parties. No. | otcy, did you own a business or have any on a trade, profession, or other activity, eithouny (LLC) or limited liability partnership (ecutive of a corporation g or equity securities of a corporation art 12. | ner full-time or part-time | | |
| 27 | Within 4 years before you filed for bankrup A sole proprietor or self-employed i A member of a limited liability comp A partner in a partnership An officer, director, or managing ex An owner of at least 5% of the votin No. None of the above applies. Go to Pa Yes. Check all that apply above and fill in Within 2 years before you filed for bankrup institutions, creditors, or other parties. No. | otcy, did you own a business or have any on a trade, profession, or other activity, eithouny (LLC) or limited liability partnership (ecutive of a corporation g or equity securities of a corporation art 12. In the details below for each business. | ner full-time or part-time | | |
| 27 | Within 4 years before you filed for bankrup A sole proprietor or self-employed i A member of a limited liability comp A partner in a partnership An officer, director, or managing ex An owner of at least 5% of the votin No. None of the above applies. Go to Pa Yes. Check all that apply above and fill in Within 2 years before you filed for bankrup institutions, creditors, or other parties. No. | otcy, did you own a business or have any on a trade, profession, or other activity, eithouny (LLC) or limited liability partnership (ecutive of a corporation g or equity securities of a corporation art 12. In the details below for each business. | ner full-time or part-time | | |
| 27 | Within 4 years before you filed for bankrup A sole proprietor or self-employed i A member of a limited liability comp A partner in a partnership An officer, director, or managing ex An owner of at least 5% of the votin No. None of the above applies. Go to Pa Yes. Check all that apply above and fill in Within 2 years before you filed for bankrup institutions, creditors, or other parties. No. | otcy, did you own a business or have any on a trade, profession, or other activity, eithouny (LLC) or limited liability partnership (ecutive of a corporation g or equity securities of a corporation art 12. In the details below for each business. | ner full-time or part-time | | |
| | Within 4 years before you filed for bankrup A sole proprietor or self-employed i A member of a limited liability comp A partner in a partnership An officer, director, or managing ex An owner of at least 5% of the votin No. None of the above applies. Go to Pa Yes. Check all that apply above and fill in Within 2 years before you filed for bankrup institutions, creditors, or other parties. No. | otcy, did you own a business or have any on a trade, profession, or other activity, eithouny (LLC) or limited liability partnership (ecutive of a corporation g or equity securities of a corporation art 12. In the details below for each business. | ner full-time or part-time | | |
| 27 | Within 4 years before you filed for bankrup A sole proprietor or self-employed i A member of a limited liability comp A partner in a partnership An officer, director, or managing ex An owner of at least 5% of the votin No. None of the above applies. Go to Pa Yes. Check all that apply above and fill in Within 2 years before you filed for bankrup institutions, creditors, or other parties. No. | otcy, did you own a business or have any on a trade, profession, or other activity, eithouny (LLC) or limited liability partnership (ecutive of a corporation g or equity securities of a corporation art 12. In the details below for each business. | ner full-time or part-time | | |
| 27 | Within 4 years before you filed for bankrup A sole proprietor or self-employed i A member of a limited liability comp A partner in a partnership An officer, director, or managing ex An owner of at least 5% of the votin No. None of the above applies. Go to Pa Yes. Check all that apply above and fill in Within 2 years before you filed for bankrup institutions, creditors, or other parties. No. | otcy, did you own a business or have any on a trade, profession, or other activity, eithouny (LLC) or limited liability partnership (ecutive of a corporation g or equity securities of a corporation art 12. In the details below for each business. | ner full-time or part-time | | |
| 27 | Within 4 years before you filed for bankrup A sole proprietor or self-employed i A member of a limited liability comp A partner in a partnership An officer, director, or managing ex An owner of at least 5% of the votin No. None of the above applies. Go to Pa Yes. Check all that apply above and fill in Within 2 years before you filed for bankrup institutions, creditors, or other parties. No. | otcy, did you own a business or have any on a trade, profession, or other activity, eithouny (LLC) or limited liability partnership (ecutive of a corporation g or equity securities of a corporation art 12. In the details below for each business. | ner full-time or part-time | | |

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| Part 12: | Sign Below | | | | |
|--|---|--|--|--|--|
| I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. | | | | | |
| 🗶 Isl | Yolanda Ellington-Reese | • | | | |
| Sig | nature of Debtor 1 | Signature of Debtor 2 | | | |
| Da | te <u>05/24/2017</u> MM / DD / YYYY | Date | | | |
| Did you | attach additional pages to Your Statement of Financial Affa | nirs for Individuals Filing for Bankruptcy (Official Form 107)? | | | |
| No | | | | | |
| Yes | | | | | |
| Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms? | | | | | |
| No | | | | | |
| Yes. | Name of person | Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). | | | |
| | | | | | |

| Fill in this ir | Caso 17 167 | | Filad 05/21/17 Enta | red 05/31/17 13:53:1 5 of 59 | .1 Desc Main | |
|------------------------------|--|---------------------------------------|---------------------------------------|-------------------------------------|---|-------|
| | | | | 3 01 33 | | |
| Debtor 1 | Yolanda | | Ellington-Reese | | | |
| Dahtar 0 | First Name | Middle Name | Last Name | | | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name | | | |
| | | | | | | |
| United States | s Bankruptcy Court for the : | NORTHERN DISTRICT OF 1 | (State) | | Charle if this is an | |
| Case Numbe (If known) | r | | _ | | Check if this is an amended filing | |
| | | | | _ | amended ming | |
| Official F | orm 108 | | | | | |
| Stateme | nt of Intention | for Individua | ls Filing Under Cha | pter 7 | | 12/15 |
| = | dividual filing under chap | · · · · · · · · · · · · · · · · · · · | this form if: | | | |
| | ve claims secured by you | | i.a.d | | | |
| = | sed personal property an his form with the court wi | - | | the date set for the meeting of cr | reditors. | |
| | | | | the creditors and lessors you list. | • | |
| | | | equally responsible for supplyir | - | | |
| Both debtors n | nust sign and date the for | rm. | | | | |
| Be as complete | e and accurate as possibl | e. If more space is need | led, attach a separate sheet to th | is form. On the top of any addition | nal pages, | |
| write your nam | e and case number (if kn | own). | | | | |
| Part 1: | List Your Creditors Who Ha | ave Secured Claims | | | | |
| For any cre information | = | art 1 of Schedule D: Cre | editors Who Have Claims Secure | d by Property (Official Form 106D |), fill in the | |
| Identify the | creditor and the property | / that is collateral | What do you intend to secures a debt? | do with the property that | Did you claim the property as exempt on Schedule C? | |
| Creditor's | ; | | ☐ Surrender the | e property | □ No | |
| name: | | | = | operty and redeem it | ☐ Yes | |
| Dogorintic | on of | | Retain the pr | operty and enter into a | □ 163 | |
| Description property | סוו טו | | — Reaffirmation | • | | |
| securing | debt: | | _ | operty and [explain]: | | |
| | | | _ | | _ | |
| Creditor's | · · · · · · · · · · · · · · · · · · · | | Surrender the | property | □ No | |
| name: | | | Retain the pr | operty and redeem it | □ Yes | |
| Description | on of | | Retain the pr | operty and enter into a | ☐ 103 | |
| property | on or | | Reaffirmation | Agreement. | | |
| securing | debt: | | Retain the pr | operty and [explain]: | | |
| _ | | | | | | |
| Creditor's | . | | Surrender the | e property | ∏No | |
| name: | | | <u> </u> | operty and redeem it | ☐ Yes | |
| December | | | | operty and enter into a | ☐ 1 <i>es</i> | |
| Description property | on of | | Reaffirmation | • | | |
| securing | debt: | | | operty and [explain]: | | |
| | | | | 1 A - 1 Ferdermile | _ | |
| Creditor's | | | Surrender the | e property | ∏No | |
| name: | • | | = | operty and redeem it | _ | |
| | | | | operty and redeem to a | Yes | |
| Description | on of | | Reaffirmation | • | | |
| property securing | deht: | | | operty and [explain]: | | |
| securing (| u c vi. | | ☐ Ketain the br | operty and texpiality | <u>—</u> | |

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| List Your Unexpired Personal Property Leases or any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 1060), I in the information below. Do not list real estate leases. Unexpired Asses are leases that are still in effect; the lease period has not yet inded. You may assume an unexpired personal property lease if the trustee does not assume it. 10 u.S.C. § 365(p)(2). Description of leased property: Lessor's name: Description of leased property: | r any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Lease in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the | |
|--|--|----------------------------|
| In the Information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet inded. You may assume an unexpired personal property leases Describe your unexpired personal property leases Will the lease be assumed the still U.S.C. § 365(p)(2). | in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the | |
| Describe your unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2). Describe your unexpired personal property leases Lessor's name: Lessor's name: Description of leased property: | | |
| Describe your unexpired personal property leases Lessor's name: Description of leased property: Lessor's name: Description of leased | led. You may assume an unexpired personal property lease if the trustee does not assume it. 11 H.S.C. & 365/ | |
| Lessor's name: Lessor's name: | rou may assume an unexpired personal property lease if the trustee does not assume it. 11 0.0.0. 3 000 | ,p)(2). |
| Description of leased property: Lessor's name: Description of leased property: | Describe your unexpired personal property leases | Will the lease be assumed? |
| Description of leased property: Lessor's name: Description of leased property: | Lessor's name: | ☐ No |
| Description of leased property: Lessor's name: Description of leased | | ☐ Yes |
| Description of leased property: Lessor's name: Description of leased property: | Lessor's name: | |
| Description of leased property: Lessor's name: Description of leased | · | Yes |
| Description of leased property: Lessor's name: Description of leased | Lessor's name: | □No |
| Description of leased property: Lessor's name: Description of leased property: Lessor's name: Lessor's name: Description of leased property: Lessor's name: Description of leased property: Lessor's name: Description of leased property: | · | Yes |
| Description of leased property: Lessor's name: Description of leased property: | Lessor's name: | |
| Description of leased property: Lessor's name: Description of leased property: Lessor's name: Description of leased property: Lessor's name: Description of leased | | ∐Yes |
| Description of leased property: Lessor's name: Description of leased property: Lessor's name: Description of leased property: Lessor's name: Description of leased | Lessor's name: | |
| Description of leased property: Lessor's name: Description of leased Yes Yes Yes | · | □Yes |
| Description of leased property: Lessor's name: Description of leased Yes | Lessor's name: | □No |
| Description of leased | | □Yes |
| Description of leased | Lessor's name: | |
| | · | Yes |
| Part 3: Sign Below | art 3: Sign Below | |
| ler penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and any | | - debt and ann |

Page 2 of 2

Signature of Debtor 1

Date Dated: 05/24/2017

MM / DD / YYYY

MM / DD / YYYY

Date

Signature of Debtor 2

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B2030 (Form 2030) (12/15)

United States Bankruptcy Court NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

| In | re | | | | |
|----|---|--------------------------------|-------------------------|--------------------------|---------|
| Yo | landa Ellington-Reese / Debtor | | Case No: | | |
| | | | Chapter: | Chapter 7 | |
| | DISCLOSURE OF C | OMPENSATION OF AT | TORNEY FOR DEF | BTOR | |
| | Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 201 mpensation paid to me within one year before the filing oldered or to be rendered on behalf of the debtor(s) in con | of the petition in bankruptcy | y, or agreed to be paid | d to me, for services | S |
| | For legal services, I have agreed to accept | \$1,000.00 | | | |
| | Prior to the filing of this statement I have received | \$1,000.00 | | | |
| | Balance Due | \$0.00 | | | |
| 2. | The source of the compensation paid to me was: | | | | |
| | Debtor(s) Other: (specify) | | | | |
| 3. | The source of compensation to be paid to me is: | | | | |
| | Debtor(s) Other: (specify) | | | | |
| 4. | I have not agreed to share the above-disclosed co of my law firm. | mpensation with any other | person unless they ar | e members and asso | ociates |
| | I have agreed to share the above-disclosed competed of my law firm. A copy of the agreement, togeth attached. | - | - | | |
| 5. | In return for the above-disclosed fee, I have agreed to case, including: | render legal service for all a | aspects of the bankru | ptcy | |
| | a. Analysis of the debtor's financial situation, and re | endering advice to the debt | or in determining wh | ether to file a petition | on in |
| | bankruptcy; b. Preparation and filing of any petition, schedules, | statements of affairs and pl | an which may be req | uired; | |
| 6. | By agreement with the debtor(s), the above-disclosed to Fee does NOT include any work done post-filing. | fee does not include the foll | lowing service: | | |
| | | CERTIFICATION | | | |
| | I certify that the foregoing is a comple payment to me for representation of the de | | _ | or | |
| | Date: 05/30/2017 | /s/ Cecil Denard Scrug | gs | | |
| | Date | Signature of Attorney | | | |
| | | Geraci Law L.L.C. | | | |

724783 Page 1 of 1 Record #

Name of law firm

Case 17-16732 Geraci Lawie LLO6/31/inois Endiana Wisconsin 13:53:11 Desc Main Headquarters: 55 E. Monroe Street, #3400 Chlogoculingent 86P.92507478 OFLIGHT CORNER WWW.INFOTAPES.COM

Date: 12/16/2016

Consultation Attorney: TAR

Record #: 724-783



Retainer Agreement Chapter 7 - Pre-filing

| Services before filing in Court: I retain Geraci Law L.L.C. to prepare to file a Chapter 7 bankruptcy petition in court. I agree to pay, by debit only, a flat fee for services before filing in court of \$1,000.00_ at \$ { } today, \$ { } per { } starting { } and \$ { } within 60 days of today. Bankruptcy is time-sensitivel may pay more than this amount to pre-pay post-filing services. After filing in court, any balance on the pre-filing fee is discharged. We will start preparing your documents as soon as you sign this contract. Work before signing is no charge. Work or Costs advanced AFTER filing in Court is not included in the pre-filing amount, unless you pay us for it in advance: |
|---|
| After we file your Chapter 7 bankruptcy in Court, we will advance your Court Cost of \$335, and the flat fee for services after case filing is \$\frac{1.095.00}{2.095.00}\$ & \$335 = \$\frac{1.430.00}{2.095.00}\$ total flat fee. We will present you with an agreement to repay the \$335, and pay a fee for our services after filing through Discharge or case closing without discharge. Whether or not you sign a post-filing agreement is entirely voluntary: you are not required to retain Geraci Law for post-bankruptcy services. You may hire some other law firm to finish your bankruptcy and Geraci Law may withdraw from representing you. |
| The flat fee for pre-filing work pays for: consultation after hiring us, (before retaining us is free) preparation petition and schedules, means test & statement of financial affairs; phone calls, emails, web messages; processing and reviewing documents that we requested from you including faxes, emai attachments, web uploads and mail; office appointment to review and sign your petition; filing your case in court. Excluded: appearance in any court o proceeding; taking calls from your creditors or bill collectors. If you decide to pre-pay, or pay for ALL services before and after we file your case in court, all work until case closing is included except: missed section 341 meetings; amendments to schedules; adversary proceedings; any motions including to reopen, avoid judgment liens, for enlargement of time; any contested matter including but not limited to objections to exemptions, motions to dismiss; attending rule 2004 examinations; reviewing documents that we did not specifically request from you; appearance other than bankruptcy court. |
| Flat fee. With "flat fee", rather than hourly, you know in advance your entire cost unless additional work is required and it usually is cheaper, but you may choose to pay for our services billed hourly at \$75 -\$450/hour, and pay in advance a security retaier, which may cost you more, or less than a flat fee. Advance Payment Retainer. Payments on flat fee or hourly become our property on payment and are deposited into our operating account, not into a client trust account. We will only refund unearned fees You may enter into a security retainer agreement with another law firm: we will not because you may lose funds held in our trust account which may be assets in a Chapter 7. |
| Termination . If you decide not to proceed, delay, fail to respond, fail to pay my attorneys or provide all information & sign my petition according to this schedule, I agree that Geraci Law may discontinue work and charge me for the work done to date at hourly rates shown above. We will only refund fees not earned. Wisconsin: We will submit any unresolved dispute about the fee to binding arbitration within 30 days or receiving written notice of the dispute. You may file a claim with the Wisconsin Lawyers' Fund for Client Protection if the we fail to provide a refund or unearned advanced fees. If you dispute the amount of the fee and want that dispute to be submitted to binding arbitration, you must provide written notice of the dispute to Geraci Law within 30 days of the mailing of the accounting. If we are unable to resolve the dispute to the satisfaction of you within 30 days after notice of the dispute from the client, we shall submit the dispute to binding arbitration. |
| Time matters: You agree: to fully cooperate with us and provide all information required; use Client Corner and not to cause excessive work; that more than one attorney or staff will work on your file there is no extra charge for the entire Geraci Law Team, unlike single attorney "law firms". Change in circumstances: This flat fee is based on the facts you told us. If that changes, your fee may change. Exemption laws only protect a limited amount of property. File Chapter 13 if you have property not claimed as exempt, or risk turn over "non-exempt" property to a Trustee. No guarantee of Discharge Creditors or others may object to a chapter 7 discharge of certain debts or to any discharge, for a variety of reasons. Debts not discharged: studer loans; educational debts and tuition; most tax debts; undisclosed debts; maintenance or support; fines; fraud, stealing or intentional injury claims, debt after filing including HOA dues; other debts listed in your green folder as usually not discharged. No discharge if you don't take the 2nd educational course. I will not transfer or acquire any property or incur any credit or debt before filing, and I must make full disclosure of all income, expenses, debt and assets on my bankruptcy petition as of the date I sign it. I AGREE TO READ EVERY PAGE AND EVERY LINE OF MY PETITION BEFORE I SIGN IT AND TO MAKE SURE THAIT IT IS COMPLETE AND CORRECT. AND TO MAKE SURE THAIT IT IS COMPLETE AND CORRECT. X |
| Attorney for the Debtor(s), Representing Geraci Law L.L.C. rev 161112 |

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UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

In re

Yolanda Ellington-Reese / Debtor Bankruptcy Docket #:

Judge:

VERIFICATION OF CREDITOR MATRIX

The above named Debtor(s) hereby verify that the attached list of creditors is true and correct to the best of our knowledge.

I DECLARE UNDER PENALTY OF PERJURY THAT THE FOREGOING IS TRUE AND CORRECT.

Dated: 05/24/2017 /s/ Yolanda Ellington-Reese

Yolanda Ellington-Reese

X Date & Sign

Record # 724783 B 1D (Official Form 1, Exh.D)(12/08) Page 1 of 1

^{*} Joint debtors must provide information for both spouses. Penalty for making a false statement or concealing property: Fine up to \$500,000 or up to 5 years imprisonment or both. 18 U.S.C. 152 and 3571.

B 201A (Form 201A) (11/11)

UNITED STATES BANKRUPTCY COURT

NOTICE TO CONSUMER DEBTOR(S) UNDER §342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly- addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days <u>before</u> the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

Chapter 7: Liquidation (\$245 filing fee, \$75 administrative fee, \$15 trustee surcharge: Total fee \$335

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are

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Form B 201A, Notice to Consumer Debtor(s)

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In re Yolanda Ellington-Reese / Debt Page 2

found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

Chapter 13: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

Chapter 11: Reorganization (\$1,167 filing fee, \$550 administrative fee: Total fee \$1,717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The

| Dated: 05/24/2017 | /s/ Yolanda Ellington-Reese |
|-------------------|-----------------------------|
| | Yolanda Ellington-Reese |
| | |

Dated: 05/30/2017 /s/ Cecil Denard Scruggs

Attorney: Cecil Denard Scruggs

Form B 201A. Notice to Consumer Debtor(s) Record # 724783 Page 2 of 2

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| ebtor 1 | Yolanda | Ellington | n-Reese Case Number (if | known) |
|--|--|---|---|--|
| | First Name | Middle Name Last Name | | |
| Part 6 | Answer These Question | s for Reporting Purposes | | |
| Part 6 | Answer Inche Question | | | fined in 11 U.S.C. § 101(8) |
| | Vhat kind of debts do ou have? | as "incurred by an individual p ☐No. Go to line 16b. | consumer debts? Consumer debts are def orimarily for a personal, family, or household p | purpose." |
| | | Yes. Go to line 17. | | |
| | | 16b. Are your debts primarily money for a business or inves | business debts? Business debts are debts the businestment or through the operation of the businestment. | s that you incurred to obtain ss or investment. |
| | | No. Go to line 16c. Yes. Go to line 17. | | |
| | | 16c. State the type of debts you ov | we that are not consumer debts or business of | lebts. |
| | | | | |
| | Are you filing under Chapter 7? | ☐ No. I am not filing under Ch | | |
| | • | Yes. I am filing under Chapte | er 7. Do you estimate that after any exempt p s are paid that funds will be available to distri | property is excluded and bute to unsecured creditors? |
| | Do you estimate that after any exempt property is | _ | - | |
| _ | excluded and | No. | | |
| | administrative expenses are paid that funds will be | Yes. | | |
| a | available for distribution | ÷ | | |
| t | o unsecured creditors? | | — | ☐ 25,001-50,000 |
| | How many creditors do | 1-49 | ☐ 1,000-5,000 ☐ 5,001-10,000 | 50,001-100,000 |
| | you estimate that you | ☐ 50-99 ☐ 400-400 | 10,001-25,000 | ☐ More than 100,000 |
| (| owe? | ☐ 100-199 ☐ 200-999 | — 101 1 | |
| 40 | How much do you | \$0-\$50,000 | ☐ \$1,000,001-\$10 million | □\$500,000,001-\$1 billion |
| | How much do you estimate your assets to | \$50,001-\$100,000 | \$10,000,001-\$50 million | \$1,000,000,001-\$10 billion |
| | be worth? | ☐ \$100,001-\$500,000 | ☐ \$50,000,001-\$100 million | □\$10,000,000,001-\$50 billion |
| | | ☐ \$500,001-\$1 million | ☐ \$100,000,001-\$500 million | ☐More than \$50 billion |
| 20. | How much do you | \$0-\$50,000 | ☐ \$1,000,001-\$10 million | \$500,000,001-\$1 billion |
| | estimate your liabilities | \$50,001-\$100,000 | ☐ \$10,000,001-\$50 million | \$1,000,000,001-\$10 billion |
| . 1 | to be? | \$100,001-\$500,000 | \$50,000,001-\$100 million | \$10,000,000,001-\$50 billion |
| | | \$500,001-\$1 million | ☐ \$100,000,001-\$500 million | ☐ More than \$50 billion |
| Part | 7: Sign Below | | | |
| For y | <i>r</i> ou | I have examined this petition, and correct. | I declare under penalty of perjury that the inf | ormation provided is true and |
| | | If I have chosen to file under Chap of title 11, United States Code. I u under Chapter 7. | pter 7, I am aware that I may proceed, if eligit inderstand the relief available under each cha | ole, under Chapter 7, 11,12, or 13 apter, and I choose to proceed |
| | | If no attorney represents me and this document, I have obtained ar | i did not pay or agree to pay someone who is nd read the notice required by 11 U.S.C. § 34 | not an attomey to help me fill out 2(b). |
| *************************************** | | | the chapter of title 11, United States Code, s | |
| *************************************** | | I understand making a false state with a bankruptcy case can result 18 U.S.O. §§ 152, 1341, 1519, a | ement, concealing property, or obtaining mone t in fines up to \$250,000, or imprisonment for and 3571. | ey or property by fraud in connection up to 20 years, or both. |
| | | Signature of Debtor 1 | light fee x sign | nature of Debtor 2 |
| *************************************** | | / 5.3 | H ₁₂₀₁₇ | ocuted on |
| ALL CONTRACTOR OF THE CONTRACT | | Executed on : | EXE | MM / DD / YYYY |

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| • | | | | _ | |
|---------------------------------|--|-------------------------------|-----------------------------------|---|-----|
| Fill in this inf | ormation to identify y | your case: | | | |
| Debtor 1 | Yolanda | - | Ellington-Reese | | |
| Deplor | First Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name | | |
| United States | Bankruptcy Court for the | : <u>NORTHERN</u> District of | ILLINOIS | | |
| Case Number | | | (State) | Check if this is an amended filing | |
| (ii kilowii) | | | | amended illing | |
| | | | | | |
| | | | | | |
| fficial Fo | orm 106 Dec | <u>.</u> | | | |
| | | | | | |
| eclarat | ion About a | an Individual I | Debtor's Schedul | es | 12/ |
| | 18 U.S.C. §§ 152, 134 [,] Sign Below | | | | |
| | | | | | |
| Did you pay | or agree to pay som | eone who is NOT an atto | rney to help you fill out bankrup | tcy forms? | |
| ■ No | | | | | |
| | Name of Person | · . | <u> </u> | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). | d |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| Under pena | ity of perjury, i decla | re that I have read the su | mmary and schedules filed with | this declaration and that they are true and | |
| correct. | 1 | | | | |
| | ,,, | | | | |

Signature of Debtor 2

MM / DD / YYYY

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| Debtor 1 | Yolanda | | Ellington-Reese | Case Number (if known) |
|----------|------------|-------------|-----------------|------------------------|
| | First Name | Middle Name | Last Name | |

| Part 12: Sign Below |
|---|
| I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Signature of Debtor 1 Date 5/24/2017 MM / DD / YYYY MM / DD / YYYY |
| Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? |
| ■ No |
| Yes |
| Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms? |
| ■ No Yes. Name of person Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |
| Declaration, and digitate (Citical Form 113). |

Case 17-16732 Doc 1

Filed 05/31/17 Entered 05/31/17 13:53:11 Desc Main Document Page 55 of 59 Ellington-Reese Case Number (if known) Debtor 1 Yolanda First Name Middle Name Last Name List Your Unexpired Personal Property Leases

| l in the information below. Do not list real estate leases. <i>Unexpired le</i> ases are leases the inded. You may assume an unexpired personal property lease if the trustee does not as | |
|---|--|
| Describe your unexpired personal property leases | Will the lease be assumed? |
| Lessor's name: | ☐ No |
| Description of leased property: | Yes |
| Lessor's name: | □ No |
| Description of leased property: | Yes |
| Lessor's name: | □No |
| Description of leased property: | ☐ Yes |
| Lessor's name: | □No |
| Description of leased property: | ☐Yes |
| Lessor's name: | |
| Description of leased property: | □Yes |
| Lessor's name: | □No |
| Description of leased property: | Yes |
| Lessor's name: | □ No |
| Description of leased property: | ☐ Yes |
| Part 3: Sign Below | |
| der penalty of perjury, I declare that I have indicated my intention about any property | of my estate that secures a debt and any |
| Signature of Debtor 1 | 2 |
| Date Dated: 5 / 2/ 12/ Date MM / DD / YYYY | |

Official Form 108

Record # 724783

DISCLAIMER Debtors have read and agree:

- 1. Divorce or family support debts to a spouse, ex-spouse, child, guardian ad litem or similar person or entityin connection with a separation agreement, divorce decree or court order are not dischargable. Priority support debts must be paid in full in your Chapter 13 or it cannot be confirmed. DEBTS YOU AGREED TO ASSUME IN MARITAL SETTLEMENT AGREEMENTS are NON-DISCHARGEABLE if your ex-spouse files an adversary complaint, and the Judge rules that (a) you do not have the ability to pay the debt OR (b) discharging such debt would result in a benefit to you that outweighs the detriment to ex-spouse or your child. You agree to get advice in writing from your divorce attorney and send to us with copy of agreement. You must list any ex-spouse or spouse as a creditor. No guarantee any divorce debt is dischargeable. Property you are still on title to, or have a right to in a divorce, may be taken by a Bankruptcy trustee in a Chapter 7 and sold, or may be disposable income in a 13.
- 2. Student loans and educational benefits are not discharged in Chapter 7 or 13 if government insured loan or owed to non-profit school unless you pay us to file a complaint within the bankruptcy to prove repayment would be an "undue hardship", and win. Interest on student loans continue to run while you are in a Chapter 13.
- 3. Cosigners, joint applicants, debts of persons other than debtor, debts incurred during marriage in community property states, or for family support are not discharged and joint, community or co-signers are not protected from collection unless you pay 100% of the debt. Creditors can collect from co-signers and put your bankruptcy on their credit report, and report them negatively to credit bureaus. You may prevent this by making the regular payments to the creditor. Creditors can liquidate collateral of your co-signer and refuse to continue payment in installments. Property you are joint on with other persons can be LIQUIDATED to pay your creditors.
- 4. TAX DEBTS. Most taxes are not discharged in bankruptcy. However, income tax debt (1040 type tax) can be discharged if the following four rules are met:

 (1). The tax return was DUE at least 3 YEARS (plus extensions) before the filing of your bankruptcy case. (2). You FILED your income tax return at least 2
 YEARS before your bankruptcy was filed. (You did not file a return if the tax authority or IRS had to file one for you, or if you didn't send the return to the District
 Director) (3). You did not wilfully intend to evade the tax. (4). The tax must have been ASSESSED over 240 DAYS before the bankruptcy filing. We recommend
 you meet with the IRS or state department of revenue to make sure all the conditions have been met, before you hire us or file a bankruptcy. Fraudulent taxes
 and taxes on unfiled returns can be discharged in a Chapter 13 case. Time in an offers in compromise, & time in bankruptcy plus 6 months, will extend the above
 time periods. Employers' share of FICA & FUTA is dischargeable, but not trust fund taxes like the employee's funds or sales tax.
- Fines, traffic tickets, parking tickets, penalties to governmental unit are not discharged in Chapter 7, may not be discharged in 13 without full payment.
 Non filing spouse: If you file individually, your spouse is not our client. Only your debts are discharged. If you want to protect a non-filing spouse, pay their bills or file a joint case with them. Family expenses (medical bills, rent and necessities may be collected from a non-filing spouse). Wisconsin, community

property is liable for community debts. 7. DUI PERSONAL INJURIES, DEBTS YOU DON'T LIST are not discharged.

- 8. DEBTS where creditors successfully object to discharge may survive Creditors, the Trustee, or Court, can try to deny discharge based on many factors, a. Income sufficient to pay a percentage of your unsecured debt. b. Failure to keep books and records documenting your financial affairs. c. Luxury purchases or cash advances within 60 days of filing or without intent or ability to repay. d. Debts you made by false pretenses, breach of fiduciary duty, wilful and malicious injuries to others e. Benefit overpayments like aid or unemployment if a determination of fraud has been made before or during bankruptcy. f. Failure to appear at meetings, court dates, or co-operate with the Trustee.
- 9. INTEREST ON NON-DISCHARGEABLE DEBTS in a Chapter 13 continues to accrue, and CREDITORS WHO DO NOT FILE CLAIMS in your Chapter 13 plan within 90 days (180 days for governmental units) of the meeting of creditors, do not get paid. Your plan and their claim should provide for interest at contract rate, or you will have to pay the debt outside the Chapter 13 plan. Property taxes must be paid by you directly to avoid sale for delinquent taxes.
- 10. LIQUIDATION OF REAL AND PERSONAL PROPERTY. If you file a Chapter 7, any property that is not listed and claimed exempt on Schedule C pursuant to state or federal law is taken and sold by the trustee to pay creditors. You agree to assume the risk that your property will be taken and sold by the bankruptcy trustee (at or less than what it is worth) if we can't protect it under applicable state law. You get a discharge, but the trustee can take property not listed and exempted on schedules B and C and sell it for whatever price will provide some benefit to creditors.
- 11. CHANGE IN LAWS. Laws & court cases change constantly. We can file your case today if you pay us in full (some attorneys give credit, we don't) pay the filing fee and sign your petition in our main office. ANY DELAY either in hiring us, or after, IS YOUR REPSONSIBILITY. ADVERSE RULINGS Judges that sit in adjoining courtrooms can rule differently on the same facts. We can predict but can't guarantee a judge will or will not rule against you. You accept the risk of a judge ruling against you, as in any lawsuit.
- 12. PAYMENTS TO CREDITORS YOU PREFERRED to pay more than \$600 in front of others, within 1 yr if a relative or insider, or within 90 days if another creditor, so don't pay off debts to keep credit cards or protect others. TRANSFERS OF PROPERTY within 4 years that made you unable to pay your debts at the time can be reversed by a Trustee and the transferee will have to give back the property you transferred.
- 13. SURRENDER OF PROPERTY Bankruptcy gets rid of debts, but real estate, condos and time shares remain in your name until a foreclosure sale or the lender accepts a deed in lieu of foreclosure. Turn condo keys over to condo association or remain liable for assessments after filing, and make sure you keep buildings & land insured and maintained and secured until it is taken back by lender or out of your name. If you let a house go vacant and pipes explode or someone gets killed in there you may be liable.
- 14. RIGHT TO RECEIVE inheritances, tax refunds, injury claims, compensation of any kind, insurance or realty commissions, are property of the bankruptcy estate and you will surrender these to the trustee unless they are claimed exempt on Schedule C, and no objection to your claim of exemption is upheld. Do not deduct extra money from taxes so you are entitled to a refund, change your W-9 if necessary.
- 15. JOINT ACCOUNT HOLDERS holders entire amount in the account could be taken by the trustee under Chapter 7.
- 16. MARRIED COUPLES GOING THROUGH DIVORCE: We have been advised to seek independent counsel for our bankruptcy. We understand that Peter Francis Geraci does not represent us with regard to any divorce matters and does not make any representations regarding what will happen in divorce court. We have decided to file a bankruptcy together dispite the fact that we are getting a divorce and our interests could be adverse. We have agreed to cooperate with each other in this joint bankruptcy.
- 17. AUTO LEASES & INSTALLMENT AGREEMENTS to purchase things, leases and almost all contracts will be void after bankruptcy. They are "executory contracts", and if they are of no benefit to the bankruptcy estate and not assumed within 60 days of filing, they are void. Debtors have been warned of this, and unless there is a novation under state law, or agreement not to use bankrptcy to void the contract, the debtors rights under the contract are extinguished. Debtor agrees to be responsible for obtaining such agreements or losing rights under such contracts. Debtor agrees that his or her attorney will not file motions to assume such contracts.

18. Setoffs if you have money in a credit union or creditor account, or other loans that cross-collateralized, any money or property may be taken for both loans. The Undersigned have read the above & assume the risk that a gebt is not discharged in bankruptcy, that our non-exempt property will be taken and sold by the bankruptcy trustee if it can't be protected, that the trustee might object if I/we have excess income, or change in State, Federal or Bankruptcy laws before the case is filed in Court AND WE HAVE TO READ, CHECK, a MAYE SURE OUR PETITION IS ACCUSATE!!!

Dated: 5 / 24 /2017

Yolanda Ellington-Reese

X Date & Sign

Record #

Case 17-16732 Doc 1 Filed 05/31/17 Entered 05/31/17 13:53:11 Desc Main Document Page 57 of 59

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

In re

Yolanda Ellington-Reese / Debtor

Bankruptcy Docket #:

Judge:

VERIFICATION OF CREDITOR MATRIX

The above named Debtor(s) hereby verify that the attached list of creditors is true and correct to the best of our knowledge.

I DECLARE UNDER PENALTY OF PERJURY THAT THE FOREGOING IS TRUE AND CORRECT.

Dated: 5 / 24/2017

Yolanda Ellington-Reese

X Date & Sign

^{*} Joint debtors must provide information for both spouses. Penalty for making a false statement or concealing property: Fine up to \$500,000 or up to 5 years imprisonment or both. 18 U.S.C. 152 and 3571.

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| De | btor 1 | Yolanda | Elling | gton-Reese | | Case I | Number (if kno | wn) _ | | | | |
|--|---------|-------------------------------------|--|----------------------------------|---------------|----------------|----------------|--------|-------------------------------|-----------------|---|---|
| | | First Name | Middle Name Last Name | ime · . | | | | | | *************** | | No. |
| | | | | . • | | Colum Debto | | | Column Debtor non-filir | | ı | |
| 8. | Unem | ployment com | npensation | | | | \$0.00 | | | \$0.00 | | |
| - | Do no | t enter the amo | ount if you contend that the amount received was curity Act. Instead, list it here: | a benefit | | | | | | | | |
| | For y | ou | · | | | | | | | | | *************************************** |
| | For y | our spouse | | | | | | | | | | |
| 9. | | | ent income. Do not include any amount received to poial Security Act. | that was a | | | \$0.00 | | | \$0.00 | | |
| 10 | Do no | ot include any l victim of a war | ner sources not listed above. Specify the source of benefits received under the Social Security Act or crime, a crime against humanity, or international cary, list other sources on a separate page and put | payments received or domestic | | | | | | | | |
| | 10a | | | | | | \$0.00 | | \$ | 0.00 | | |
| | _ | | | | | \$ | 0.00 | | | \$0.00 | | |
| | 10c. 7 | Fotal amounts f | from separate pages, if any. | | | | \$0.00 | | | \$0.00 | | |
| 11 | . Calcu | ulate your tota nn. Then add t | al current monthly income. Add lines 2 through 10 he total for Column A to the total for Column B. | 0 for each | | | \$3,357.49 | + | | \$0.00 | = [| \$3,357.49 |
| | | | • | | | - | | | | | | |
| f | art 2: | Determin | ne Whether the Means Test Applies to You | | | | | | | | | |
| | | | rent monthly income for the year. Follow these st | steps: | | | | | | , | | |
| '- | 12a. | Copy your tot | tal current monthly income from line 11 | | | Сору | line 11 here | • | | 12a. | | \$3,357.49 |
| | | Multiply by 12 | 2 (the number of months in a year). | | | | | | | | *************************************** | x 12 |
| | 12b. | The result is | your annual income for this part of the form. | | | | | | | 12b. | | \$40,289.88 |
| 13 | . Calc | ulate the medi | an family income that applies to you. Follow the | se steps: | | | | | | | | |
| | Fill in | n the state in wi | hich you live. | IL | | | - | | | | | |
| | Fill in | the number of | f people in your household. | 11 | | | | | | | | |
| | To fir | nd a list of appl | amily income for your state and size of household. licable median income amounts, go online using tr form. This list may also be available at the bankru | he link specified in the | e separate | | | | | 13. | | \$50,765.00 |
| 14 | . How | do the lines c | ompare? | | | | | | | | | |
| | 14a. | x ine 12b is Go to Part | less than or equal to line 13. On the top of page 1 3. | , check box 1, There | e is no prest | umption | of abuse. | | | | | |
| W. W | 14b. | | more than line 13. On the top of page 1, check bo 3 and fill out Form 122A-2. | ox 2, The presumptio | on of abuse | is deten | mined by Fo | rm 12 | 2A-2. | | | |
| | Part 3: | Sign Bel | ow | | | | | | | | | |
| | | By signing the | ere, I declare inderpenalty of perjury that the infor | | ment and in | any atta | achments is t | true a | nd correc | t. | | |
| *************************************** | ٠ | Date: | Yolanda Ellingtdn Reese \ 5 / 24 /2017 | | | | | | | | | |
| research sold of | | If you checke | ed line 14a, do NOT fill out or file Form 122A-2. | | | | | | | | | |
| | | • | ed line 14b, fill out Form 122A-2 and file it with this | form. | * | | | | | | | |

Form B 201A, Notice to Consumer Debtor(s)

In re Yolanda Ellington-Reese / Debtor

Page 2

found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

<u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

Chapter 11: Reorganization (\$1,167 filling fee, \$550 administrative fee: Total fee \$1,717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The

Dated: 5 / 24/2017

Yolanda Ellington-Reese

X Date & Sign

Dated: ____/__/2017

Attorney: Cecil Denard Scruggs